

**SECTION 1.0**  
**INTRODUCTION**

During a pandemic, Guam will be prepared to manage the additional deaths over and above the number of fatalities currently expected during the inter-pandemic period. The total number of fatalities, including the pandemic related causes, occurring during a six-to-eight-week pandemic wave is estimated to be similar to that which typically occurs over six months in the inter-pandemic period, which is approximately 350 people in Guam. Based on WHO estimates, this would equate to about six to eight deaths a day during a pandemic wave.

As provided for in Public Law 26-173, §19504 Safe Disposal of Human Remains, (a) Adopt Measures, the Government of Guam views the content of this document as the enforceable measures to provide for the safe disposal of human remains as may be reasonable and necessary to respond to a public health emergency. Such measures may include, but are not limited to, the embalming, burial, cremation, internment, disinterment, transportation, and disposal of human remains. Therefore, the content of this plan, “Guam Mass Fatality Management Plan” equivalent to the Fatality Management Plan guidelines issued by DHHS, unless otherwise directed by PHA during a health emergency shall be the measures to enforce, operate and respond to a mass fatality in line with the aforementioned section of Guam law.

The following assumptions are made with regard to mass fatality management for a pandemic:

- Most victims will have sought medical care and have been identified before dying in the hospital; however, many others may die in their homes.
- There will be an increase in the number of official pronouncement and certification of death by authorized individuals.
- There will be an increase in the number of body bags needed to wrap human remains inside and outside of the hospital.
- There will be mobilization of equipment (i.e., vehicles, stretchers) and personnel needed to transport human remains from the sites of death to the morgue or an alternate site for the processing of human remains.
- GMHA, GRMC, OCME, and USNH will not have the capacity to store the anticipated increase of human remains inside and outside the hospitals.
- Guam mortuaries will not have the resources to conduct mass fatality operations for administering, embalming, cremating, storing, and burying of human remains, as they will

lose staff to illness, caring for ill family members, death, and refusing to work.

- OVS will be unable to issue death certificates as quickly as they occur, requiring detailed documentation and close coordination with morgue and funeral response activities.
- Mutual aid resources will be needed to support local hospitals, OCME, OVS, and funeral homes.
- Federal assistance will be sought; however, Guam cannot be assured that necessary support will be provided in a timely manner.
- The Government of Guam will take the lead role in the management of mass fatality for all individuals on Guam regardless of citizenship.

This plan will guide DPHSS to respond to large-scale fatalities due to a pandemic. The plan was developed with the review and comments of the Guam Mass Fatality Subcommittee, which is composed of OCME, participating Guam funeral directors, OVS, GMHA, USNH, AAFB, as well as members of the Guam Pandemic Planning Task Force.

DPHSS Division of Environmental Health (DEH), or other designated entity as determined by the DPHSS Director or PHA, will take the lead role in the operations planning of the Human Remains Care Center, or HRCC, which shall be the centralized site for the processing of decedents when morgue and mortuary operations become overwhelmed due to the pandemic. The Dededo Sports Complex has been identified as the HRCC. Whoever is assigned such a task shall be identified as the “HRCC Manager”. This response effort will be supported by the Department of Parks and Recreation (DPR), DPW, and the Guam National Guard (GNG), as appropriate.

## **SECTION 1.1**

### **GUAM LAWS GOVERNING HUMAN REMAINS**

- Title 10 GCA, Chapters 3 (and its rules and regulations), 4a, and 30 shall govern the embalming, cremation, transport, burial, and record keeping of human remains in Guam:
- All human remains not embalmed shall be buried or cremated within 24 hours after death, unless kept under adequate refrigeration. To the extent possible, religious, cultural, family and individual beliefs of the deceased person or that person’s family shall be considered when disposing of human remains.
- DPHSS shall issue a burial permit before human remains are buried; deposited in a crypt, mausoleum or vault; cremated; or otherwise disposed of.
- DPHSS shall arrange for the burial or other disposition of unclaimed human remains.

- In the interest of protecting the health of the public, DPHSS in its discretion, may order the burial or other forms of disposition of human remains, as it deems necessary.
- No person shall transport any human remains who died from, or while having, any communicable disease specified in Subchapter D, within Guam without the approval of DPHSS.
- DEH in concert with the DPHSS Director shall approve the establishment of all cemeteries, crypts, mausoleums, vaults, or crematoriums.
- Every person in charge of a cemetery, crypt, mausoleum, vault, or crematory shall keep complete records of all human remains interred, disinterred, removed, or cremated.
- Only one body shall be buried in each grave, unless approved by DPHSS.
- Graves shall not be less than six feet in depth below the surface and shall not be less than one foot in width and length than the coffin; however, when vaults are used, it shall not be less than 18 inches in depth below surface.
- The Governor of Guam is authorized to set aside from public lands such amount thereof as he may deem necessary for the establishment of a public cemetery.

## **SECTION 1.2**

### **ISLAN GUAHAN EMERGENCY HEALTH POWERS ACT**

- The management of human remains is further governed by Title 10 GCA, Chapter 19 (Emergency Health Powers Act) during a declaration of public health emergency by the Governor. Under such state of emergency:
- The Governor of Guam may suspend any Government of Guam regulatory statutes, orders, and rules and regulations that would prevent, hinder, or delay necessary action to respond to the public health emergency, and seek the aid of the Federal Government in accordance with any emergency compact.
- DPHSS shall coordinate all matters pertaining to the public health emergency response of Guam, including the safe disposition of human remains.
- DPHSS may take measures to safely dispose of human remains, which includes, but not limited to, their embalming, burial, cremation, interment, disinterment, transportation, and disposition.
- DPHSS can require any business or facility authorized to embalm, bury, cremate, inter, disinter, transport, and dispose of human remains under the laws of Guam to accept any

human remains or provide the use of its business or facility, if such actions are reasonable and necessary to respond to the public health emergency as a condition of licensure, authorization, or ability to continue doing business on Guam as such a business or facility. The use of business or facility may include transferring the management and supervision of such business or facility to public health authority for a limited or unlimited period of time, but shall not exceed the termination of the declaration of state of public health emergency.

- DPHSS shall procure, by condemnation or otherwise, any business or facility authorized to embalm, bury, cremate, inter disinter, transport and dispose of human remains under the laws of Guam as may be reasonable and necessary to respond to the public health emergency, with the right to take immediate possession thereof.
- DPHSS shall ensure that all human remains prior to disposition shall be clearly labeled with all available information to identify the decedent and the circumstances of death. Any human remains of a deceased person with a contagious disease shall have an external, clearly visible tag indicating that the human remains are infected and, if known, the contagious disease.
- DPHSS shall ensure that every person in charge of disposing of any human remains shall maintain a written or electronic record of each person deceased, all available information to identify the deceased, and the circumstances of death and disposition. If the human remains cannot be identified prior to disposition, a qualified person shall, to the extent possible, take fingerprints and photographs of the deceased, obtain identifying dental information, and collect a DNA specimen. All information gathered under this paragraph shall be promptly forwarded to the public health agency.
- The Government of Guam shall pay just compensation to the owner(s) of any facilities or materials lawfully taken by DPHSS or public health authority for temporary or permanent use during a public health emergency. Compensation shall not be provided for facilities or materials that are closed, evacuated, decontaminated or destroyed when there is reasonable cause to believe they may endanger public health pursuant to §19501.

## **SECTION 2.0**

### **MASS FATALITY MANAGEMENT PLAN**

To identify planning needs for the management of mass fatality during a pandemic, the subcommittee first examined each step in the management of human remains under normal circumstances during the interpandemic phase, which is presented in an algorithm in Attachment 10-A. Members then identified the limiting factors within each significant step, along with the solutions (or planning) required to address the increase in number of human remains over a short period of time in Attachment 10-B.

It is not the intent of DPHSS to dictate or interfere with the normal operation of funeral homes, cemeteries, mortuaries, hospitals, and morgues. Service providers are expected to prepare their own internal plan to address the anticipated increase in demand for their services during a pandemic. Only when such services cannot or will not be provided by the service providers, and upon activation, should DPHSS implement the necessary actions in the management of mass fatalities in accordance with this plan. As reflected in the plan, mass burials or mass cremations are not recommended and will be considered in the most extreme circumstance.

## **SECTION 2.1**

### **GENERAL PLAN**

In developing this plan, which shall be known as the “Guam Mass Fatality Management Plan” referred to as the “Mass Fatality Plan”, DPHSS involved the representatives from the following entities:

- Medical Examiner from OCME;
- Local funeral directors;
- Territorial Registrar at OVS;
- Planner from GMHA;
- Preventive Medicine of USNH;
- Public Health Element of AAFB; and
- Members of the Guam Pandemic Planning Task Force, Executive Order 2006-11.

The Mass Fatality Plan continues to be reviewed by DEH, and was tested through a table-top exercise on July 19, 2006. The Mass Fatality Plan’s viability will truly be tested only upon its actual implementation. Unlike other disaster response and recovery efforts, which are generally shorter in time span, a pandemic is anticipated to be of long duration with an increasing and consistent demand on resources.

Since it is expected that most fatal cases will seek medical services prior to death, hospitals, nursing homes, and other institutions must be capable of rapidly processing human remains. These institutions must develop their own internal plans for a pandemic and work with DPHSS and OCME to ensure they have access to additional supplies (e.g., body bags) and can expedite the steps, including the completion of required documents, necessary for efficient management of human remains during a pandemic.

In order to deal with the increase in fatalities, it may be necessary for funeral homes to establish

their own temporary holding facility for human remains needing embalming, cremation, or burial. If funeral directors are unable, or unwilling, to handle the increased number, DPHSS will be responsible for initiating and implementing appropriate measures, including the institution of powers granted under the Islan Guahan Emergency Health Powers Act.

The Government of Guam may partner with privately owned and operated providers related to this response effort to augment their manpower and equipment to support the continuation of their operations should their resources be exhausted or overwhelmed. Prior to activating this partnership, a determination of need shall be made by the DPHSS Director who will present the need to PHA (in the event the DPHSS Director is not appointed as the PHA) at EOC for further disposition. In addition, private entities as well as volunteers will be utilized to the greatest extent practicable.

## **SECTION 2.2**

### **PREPARATIONS FOR FUNERAL DIRECTORS AND CREMATORIALS OF GUAM**

There are four funeral homes (Attachment 10-C) in Guam with eight morticians; however, two morticians are military personnel and it would be expected their services may be limited to military activities during a pandemic. The funeral home industry should plan to manage a projected six months of work within a six-to-eight-week period during a pandemic. All funeral directors are expected to develop their own internal plans for addressing the increase in the number of human remains during a pandemic. Such plan should include the procurement and storage of supplies (e.g., fluids, body bags, and caskets); contingency plan for what would happen if they were incapacitated or overwhelmed; and the need for additional human resources for their operations to include, but not limited to, embalming, cremating, and digging graves.

Crematoriums will also need to look at the surge capacity within their facilities. Crematoriums should be able to handle at least one body every four hours and should plan to operate at its maximum capacity allowable according to its manufacturer's specifications in order to cope with the increased demand. This may be an alternative manner of managing the increased number of human remains during a pandemic.

## **SECTION 2.3**

### **OFFICE OF THE CHIEF MEDICAL EXAMINER AND AUTOPSIES**

OCME is responsible for the autopsies and certifications of death of individuals dying at home, from foul play, and under non-hospital care. OCME has the ability to store nine bodies in its morgue facility and acts as a repository to accept the overflow of remains from GMHA when its own morgue exceeds its capacity of twelve. Thus, OCME and the GMHA combined can accommodate the temporary storage of 21 human remains. The morgue of the USNH can manage 32 human remains at maximum capacity. USNH also possesses a container, which can accommodate another 24 remains, if needed.

The majority of deaths during a pandemic would not require autopsies since autopsies are not indicated for the confirmation of a pandemic related illness as the cause of death. However, for the purpose of public health surveillance (e.g., confirmation of the first cases at the start of the pandemic), respiratory tract specimens or lung tissue for culture or direct antigen testing could be collected post-mortem. Serological testing is not optimal but could be performed if 8-10 mL of blood can be collected from a subclavian puncture post-mortem. In accordance with 10 GCA §19602, a Medical Examination and Testing may be performed.

During a pandemic, DPHSS will seek on-going consultation of the Chief Medical Examiner for any proposed changes to the regular practices pertaining to the management of human remains as it relates to autopsy requirements. In cases where the death is reportable to OCME, the usual protocols shall prevail based on Guam law. When the Mass Fatality Plan is activated and implemented, the necessary public announcements will be made to educate and inform the public on when a body will and will not be autopsied. The JIC EOC shall be responsible for issuing public advisories related to this effort.

## **SECTION 2.4**

### **PLAN FOR TEMPORARY MORGUES**

DPHSS will take the lead in the effort to identify vendors of refrigeration containers and cold storage facilities as additional temporary cold storage facilities will be required during a pandemic for the storage of human remains. Arrangements will be made for establishing temporary morgues based on the availability of resource requirements. The resource requirements (e.g., body bags and refrigeration containers) and supply management for temporary morgues will also be addressed.

A temporary morgue must be maintained ideally at 36 °F to 40 °F (2.2 - 4.4 °C); however, if a temporary morgue cannot reach such a temperature range, 40 °F to 45 °F (4.4 - 7.2 °C) is acceptable. The types of temporary cold storage to be considered will include refrigerated containers and vehicles, and cold storage lockers.

Without stacking the remains, a refrigerated 40-ft container can generally hold 20-25 remains without shelving. To increase storage capacity, temporary wooden shelves can be constructed of sufficient strength to double the capacity to 40-50 bodies. Shelves should be constructed in such a way that allows for safe movement and removal of human remains (i.e., storage of remains above waist height is not recommended). Containers and trucks with markings of a supermarket chain or other companies will be avoided to the greatest extent practicable since the use of such trucks for the storage of human remains may result in negative implications for continuity of business. Furthermore, utilization of local businesses for the storage of human remains will be considered as a last resort.

Dry ice (carbon dioxide frozen at -78.5 °C) may also be utilized for storage of human remains; however, cost and availability may prohibit its extended use. When using such a method, groups



of 20 bodies are surrounded by a low wall of dry ice (about 1.5 ft high) and covered with a plastic sheet, tarpaulin, or tent. Dry ice should never be placed on top of the remains, even when wrapped, since it may cause damage. About 22 lbs. (10 kg) of dry ice per body, per day is usually needed, pending on outside temperature. Because dry ice produces carbon dioxide when it sublimates (“melts”), its use should only occur in a well-ventilated room or building.

Ice should be avoided since large quantities are needed and melting ice may produce contaminated wastewater that may also damage the remains.

## **SECTION 2.5**

### **PLAN FOR TEMPORARY MORTUARY**

The mass processing of human remains at a centralized location, which will be operated by the Government of Guam with the possible assistance from the DoD or other designated entities, will occur when local funeral homes are unable or unwilling to meet the demands of embalming, cremating, casketing, and/or burying human remains. Within this temporary mortuary facility, remains will be documented, embalmed (or transported to a crematorium if still possible), dressed, casketed, and arranged for their final disposition. However, certain steps may be modified, limited, or ceased altogether, depending on resources or time constraints. In a worst-case scenario when the temporary mortuary becomes overwhelmed with a large number of human remains, and resources are severely strained to meet the demand, human remains will be immediately casketed or bagged and then buried at a designated site and manner determined by DPHSS.

Psychosocial and possibly religious and cultural support to the families of the deceased may be provided at the temporary mortuary facility. These support personnel will assist the family in coping with the death of their loved ones and assist the temporary morgue in the dissemination of pertinent information. They may further assist the morticians of the facility by collecting articles of clothing the family wishes to dress the deceased when a temporary mortuary becomes operational.

## **SECTION 2.6**

### **CAPACITY AND ACCESS TO TEMPORARY HOLDING FACILITY**

A temporary dry holding facility may be required for embalmed remains if burials cannot be performed within a reasonable time. Such holding site may be situated in or near the designated temporary mortuary; however, it should ideally be as close to the cemetery as reasonably possible. Furthermore, the temporary holding facility needs to be secured with the necessary degree of security to prevent unauthorized access.

## **SECTION 3.0**

### **ADDITIONAL TECHNICAL AND LOGISTICAL CONSIDERATIONS**

The temporary morgue and mortuary operations of the HRCC will require the implementation of



supporting technical and logistic activities for the facility's processing of human remains. These essential activities in the management of human remains include the issuance of Certificates of Death, implementation of infection control measures, transportation and disposition of remains, procurement and storage of materials and supplies, seeking of federal assistance, acquisition and activation of necessary communication, and the selection of an alternate HRCC in the event the Dededo Sports Complex becomes unavailable. Possible alternate HRCC locations may be an aircraft hangar, storage warehouse, or a village gymnasium.

### **SECTION 3.1**

#### **DEATH REGISTRATION**

In Guam, the pronouncement of death is primarily the responsibility of a licensed medical doctor, but it may be performed by a licensed nurse practitioner for a terminally ill patient who dies under his/her care at a hospice. The Chief Medical Examiner is the only one who can issue "Certificate of Death," commonly known as a death certificate, unless the person dies of natural causes at a hospital and who has been admitted for more than 24 hours. In such a case, the decedent's doctor may certify the death. During a pandemic, authorization to perform the certification of death will be expanded to include authorized licensed medical physicians as determined by the Chief Medical Examiner. OCME must create and retain a current list of such authorized licensed medical physicians.

All deaths occurring in Guam require the filing of the original Certificate of Death form with OVS to be officially acknowledged and documented. Blank Certificates of Death are provided to GMHA, GRMC, USNH, and OCME by OVS. GMHA, GRMC, USNH, or OCME representative types in the relevant information about the deceased on the Certificate of Death before it is submitted to Vital Statistics. It is on this form that pronouncement and certification of death are formalized through the signature(s) of applicable practitioner(s).

Original Certificates of Death are filed and maintained by OVS. Certified copy(ies) of the certificate is issued to families and/or funeral homes. Such certified Certificates of Death are printed on specialized safety paper and embossed with the seal of the Territorial Registrar.

During a pandemic situation, with an increased death toll, a human remains collection plan will be implemented to ensure there is no unnecessary delay in moving remains to the morgue. If the person's death does not meet any of the criteria for an autopsy or further examination by the Chief Medical Examiner, then the remains are moved to a holding area soon after the pronouncement of death by a designated physician.

Funeral directors will be prohibited from collecting a decedent from the community or an institution until there is a completed Certificate of Death form filed with OVS. In the event of a pandemic with numerous deaths, it will be necessary for the DPHSS Director to implement a plan allowing the completion and issuance of Certificate of Death forms in a timely and efficient manner.

## **SECTION 3.2**

### **INFECTION CONTROL**

Special infection control measures are not required for the handling of persons who died from pandemic-related illness. Funeral homes are recommended to implement universal precautions for embalming of all human remains. In the event that infection control recommendations change for the handling of human remains, funeral homes, morticians, and others working in the field will be notified by DPHSS as soon as changes occur.

Designated personnel tasked to transport and process human remains, exclusive of embalmers, will be provided appropriate personal protection equipment, personal hygiene and sanitizing supplies.

It is the responsibility of DPHSS to place restrictions on the type and size of public gatherings if this seems necessary to reduce the spread of disease. This may apply to funerals and religious services. If families are permitted to view the body, they should be provided disposable gloves and masks. Families requesting cremation of their deceased relative are much less likely to request a visitation, thus reducing the risk of spreading disease through public gatherings.

## **SECTION 3.3**

### **TRANSPORTATION OF HUMAN REMAINS**

No special vehicle, driver license, or permit is needed for the transportation of human remains in Guam, provided the deceased did not die of the plague, smallpox, cholera, yellow fever, typhus fever, typhoid fever, or anthrax. Therefore, there will be no restrictions on families transporting the remains of family members who die of pandemic related illness. Recommended guidelines will be issued by the Department for such transport by family members.

DPHSS will coordinate and utilize its own resources of Government of Guam agencies' personnel and vehicles in the event family members or another entity cannot perform the collection and transportation of the remains.

## **SECTION 3.4**

### **SUPPLY MANAGEMENT OF MORTUARY OPERATION**

DPHSS is recommending to funeral directors that they not order excessive amounts of supplies, such as embalming fluids, body bags, etc., but that they have enough on hand in a rotating inventory to handle the first wave of the pandemic; that is enough for six months of normal operation. Fluids can be stored for years, but body bags and other supplies may have a limited shelf life. Cremations generally require fewer supplies since embalming is not required. A list of current suppliers is provided in Attachment 10-D.

Families with multiple deaths are unlikely to afford multiple higher-end products or funeral arrangements. Funeral homes could quickly run out of lower-cost items (e.g., inexpensive caskets) and should be prepared to provide alternatives. DPHSS will allow the use of durable body bags, alternative containers made of cardboard, and other materials that will prevent the leakage of fluids in place of standard commercial caskets when necessary. To assist families and private enterprises address a potential shortage of caskets, DPHSS recommends specifications for the construction of wooden caskets as illustrated in Attachment 10-E.

### **SECTION 3.5**

#### **LAND AND SEA BURIALS**

All burials of deceased persons in Guam require a “Burial-Transit Permit”, aka Disposition Permit, from OVS. For burials at sea, approval must also be obtained from the Guam Environmental Protection Agency (GEPA). This alternative burial will require sea-going vessels of appropriate specifications to handle a large number of humans’ remains.

Guam has a total of 17 known cemeteries. One is a public cemetery while the remaining 16 are owned and/or operated by various families, religious denominations, commercial entities, and the U.S. Veterans Office (Attachment 10-F). Vicente Limtiaco Cemetery (Tiguac) in Nimitz Hill is a public cemetery operated by DPR; it accepts the burial of any deceased person for a fee. The Guam Veterans Cemetery is limited to only veterans and their dependent spouses. Tiguac Cemetery is the only cemetery readily available for use by the Government of Guam for burying human remains.

Tiguac is approximately 30 acres in total land size; however, only a portion of the area is usable for burials. Approximately 5,000 plots are occupied at the public cemetery (1966-2021). At the end of 2021, there was space for the burial of additional 100-150 adults and 200-250 infants. Unused land adjacent to Tiguac is currently being considered for use to expand the cemetery.

### **SECTION 3.6**

#### **CREMATORIUMS**

There are three crematoriums on Guam, two in Yona at Our Lady of Peace and the other in Sinajana at Ada’s Mortuary. Each crematorium is capable of cremating seven bodies a day for 5 days. Thus, when fully operating, the three crematoriums can process a total of 105 decedents a week. If necessary, the crematoriums can operate at its maximum allowable capacity per the manufacturer’s specifications, but not for the entire duration of a pandemic wave (6-8 weeks).

Standard cremation involves the use of a corrugated cardboard casket to hold the remains as it is cremated. This disposable casket is used to retain leakage of bodily and embalming fluids. If necessary, the cardboard containers may be replaced with body bags that do not contain chlorides and carbons, which pollute the air and damage the cremation chamber. The continuous operation of the furnace will require necessary maintenance and the availability of LP gas to run the furnace.

Crematorium operators must include the procurement and storage of these and other supplies and materials in their own pandemic plan.

### **SECTION 3.7**

#### **TRANSSHIPMENT OF HUMAN REMAINS OFF-ISLAND**

DPHSS does not anticipate restricting the transshipment of human remains for off-island burials, provided such remains have been effectively embalmed. In all likelihood, such restriction or limitation may come from the airlines as availability of space and flights are expected to decrease. Family members who wish to have their loved ones buried off-island, but are unable to do so during the period of pandemic, may consider having the remains buried in Guam in a sound casket. These remains may later be exhumed for transport off-island, assuming no mass burials were conducted.

### **SECTION 3.8**

#### **ASSISTANCE FROM DISASTER MORTUARY OPERATIONAL RESPONSE TEAM (DMORT)**

When Guam's capacity to manage mass fatalities is exceeded, and the HRCC is activated, DPHSS will coordinate with EOC to seek the assistance of Disaster Mortuary Operational Response Team (DMORT), which consists of voluntary staff of private citizens with expertise in mass fatalities who are activated in the event of disaster, such as a public health emergency. DMORT can provide mortuary services; establish temporary morgue facilities; and process, prepare, and properly dispose of human remains. However, Guam cannot solely rely on the aid of DMORT and other off-island entities during a pandemic to address mass fatality when an entire nation will be seeking similar assistance. An alternative to DMORT assistance is to request support from DoD forces stationed on the island. This request for military assistance will be made through EOC under the direction of PHA. DPHSS will seek their assistance to improve the department's capability to implement this plan for the management of mass fatalities.

### **SECTION 3.9**

#### **COMMUNICATIONS**

The necessary communication devices for the operation of the HRCC, and its personnel, will consist of the following:

- Standard land-lines, inclusive of a teletypewriter (TTY), facsimile and hotline;
- Internet connectivity;
- Push-To-Talk radios equipped with cellular capability; and
- Mobile two-way radios and handheld radios.

Upon notification to activate the HRCC, DPHSS will request for the installation of the necessary communication lines at the HRCC.

### **SECTION 3.10**

#### **FACILITY RESOURCES**

The following considerations were taken into account when selecting the Dededo Sports Complex and the same considerations should be taken into account if an alternate site is to be chosen.

- Size of the facility to conduct the full care of human remains, which include administrative processing, embalming, dressing, casketing, and the temporary storage for burials.
- Structural capability (plumbing, electrical, ventilation, and telecommunication needs; protection from weather, including typhoons; etc.).
- Location (accessibility by government vehicles and personnel; proximity to other facilities, such as the hospital, Temporary Refrigeration Morgue (TRM), and cemetery; psychosocial effects to nearby residents; etc.).
- Security to control access and prevent unauthorized entry.

To ensure proper facility resources are afforded to the personnel and public accessing the HRCC, several key operational and logistical requirements would be needed. For example:

- Acquisition, installation, refueling and maintenance of a generator in case of loss of power;
- Acquisition and delivery of “water buffalo” or other water storage tank/container to ensure adequate water supply;
- Installation of exterior lighting around the perimeter of the facility;
- Acquisition of portable chemical toilets with service provision for use by the general public;
- Acquisition and erection of exterior canopy for public protection against the natural elements;
- Acquisition of large industrial fans for proper air circulation within the HRCC;
- Procurement of three photocopying machines with facsimile, scanning and printing from network system for the HRCC;
- Procurement of laundry services for the HRCC to include a provision of personnel to have their clothing laundered;

- Procurement of copy paper;
- Procurement of three meals and beverages per eight-hour shift; and
- Other items will be identified by DEH and forwarded to DPHSS Director for transmittal to EOC for proper procurement of other supplies and materials necessary for the operations of the HRCC.

### **SECTION 3.11**

#### **EMPLOYEE ASSISTANCE PROGRAM**

In the event it becomes compulsory for personnel to remain on the premises and are not able to return home for rest due to the overwhelming and urgent need to remain on location, provisions for personnel will be provided to assist with their basic personal needs. A shower area will be provided with proper hygienic items for showering. Laundry services for the HRCC personnel will be provided for those who remain on site for more than a single shift of eight hours. Duty meals and beverages will also be provided. In addition, webcam and phone connectivity will be afforded for personnel to communicate with their families while on rest status. No employee will be allowed to work more than 12 consecutive hours per shift. Each rest period will be for no more than eight hours. The sleep plan will be implemented by the HRCC Manager. Psychosocial support for personnel will be provided through the psychosocial component of Guam's plan in response to a pandemic.

### **SECTION 4.0**

#### **RELIGIOUS AND CULTURAL CONSIDERATIONS**

A number of religious and ethnic groups have specific directives for the management of decedents after death, and such needs are considered as a part of the management of mass fatalities. As a result of these special requirements, the assistance of the Catholic Church and other common religious groups on Guam may be sought in the implementation of the Mass Fatality Plan.

### **SECTION 5.0**

#### **ACTIVATION AND IMPLEMENTATION**

The implementation of the Mass Fatality Plan will begin when morgue space at GMHA and OCME become unavailable and the HRCC needs to be activated. The TRMs will be positioned at the HRCC. At the HRCC, all procedures in the processing of human remains will be performed in a centralized site operated by the Government of Guam and any other designated entity. Remains will continue to be documented, embalmed (or transported to a crematorium if still possible), dressed, casketed, and arranged for final disposition. The HRCC will modify, limit, or cease certain steps depending on available resources or time constraints. For example, intravenous embalming may be replaced or performed in conjunction with external (topical) embalming if embalming fluids become scarce or the need to quickly embalm becomes necessary. In a worst-case scenario when the HRCC is overwhelmed with a large number of remains that cannot be

processed, the remains will be immediately casketed or bagged without the normal embalming and then buried at a site and manner determined by the HRCC.

The HRCC may provide psychosocial, religious, and cultural support to the families of the deceased at the facility. These support personnel will assist the family in coping with the death of their loved ones and assist in the dissemination of information.

The Mass Fatality Plan will require periodic updating of relevant operational information such as contact numbers, verifying the continual usability of the designated sites of operations, updating inventory and/or distribution of supplies, procuring materials, identifying and training applicable personnel, and leasing of equipment. It is the intent of this plan to manage human remains as it is currently practiced during an interpandemic phase as best as possible. As resources become limited or unavailable, the Mass Fatality Plan will initiate actions to restrict, or cease altogether, certain activities normally performed in the handling and disposition of human remains.

## **SECTION 5.1**

### **PANDEMIC CONDITION OF READINESS 4 (PCOR4)**

- A. Review and revise, as necessary, the multi-agency MOA between Government of Guam (DPR, DPW, and DPHSS) and GHS/OCD for coordination and support in response to mass fatality as a result of a pandemic. Refer to Attachment 10-H.
- B. DPR, DPW, and DPHSS shall submit an annual report to GHS/OCD on the following:
  - 1. DPW:
    - a. Listing of functional heavy machinery necessary for clearing and grading of land; digging of graves and for mass excavation (i.e., back hoes, excavators, bulldozers)
    - b. Listing of personnel of heavy machinery operators and maintenance personnel from the Highway Safety Division
    - c. Listing of fleet of functional buses under Bus Operations Division
    - d. Listing of personnel from Bus Operations Division
    - e. Listing of personnel from Transportation Maintenance Division
  - 2. DPR:
    - a. Listing of functional heavy machinery for clearing and grading of land; digging of graves and for mass excavation (i.e., back hoes, excavators, bulldozers)
    - b. Listing of departmental personnel
    - c. Identify alternate public burial site
    - d. Provide update as to status of the public burial site for use
  - 3. DPHSS:
    - a. Listing of DPHSS personnel to be assigned to this effort
    - b. Listing of individuals to perform emergency embalming
    - c. Listing of DSC personnel to be assigned to this effort
    - d. Listing of inventory and equipment for operations of the HRCC to include refrigeration facilities



OHS/OCD shall compile the reports and provide the report to the DPHSS Director.

- C. The DPHSS Director shall coordinate within his/her department for administrative and support staff to be detailed periodically to OVS to be trained in completing the various certificates issued through this office with emphasis on Certificates of Death and Burial-Transit Permits.
- D. OVS shall ensure a sufficient number of Certificates of Death forms is in stock and shall consider an alternate form in the event of a pandemic. The DPHSS Chief Public Health Officer (CPHO) shall ensure this provision is complied with.
- E. DEH shall identify and request for the procurement of equipment DPHSS should acquire for mass fatality operations as part of the department's state of readiness in response to a public health emergency, such as a pandemic. DEH shall identify within DPHSS three laptops, 10 compatible digital cameras, three external 1GB external drives, three printers, facsimile machine, and activation of cellular phone with unlimited service plan.
- F. The forms for the operation of the HRCC shall be printed through a contractor as forms are to be printed in triplicates or quadruplicates. The forms to be used in the operation of the HRCC are as follows and shall be maintained on three flash drives and on the hard drive of three laptops by DEH as a backup:
  - 1. Human Remains Transportation Form (HRT Form). Refer to Attachment 10-I.
  - 2. Human Remains Processing Form (HRP Form). Refer to Attachment 10-J.
  - 3. Inventory and Disposition of Personal Effects Form. Refer to Attachment 10-K
  - 4. Human Remains Processing Log Sheet. Refer to Attachment 10-L.
  - 5. Certificate of Death. Refer to Attachment 10-M.
- G. The "TRM Kits" for the Temporary Refrigeration Morgue Teams are packaged. The TRM Kits will be prepared and maintained by DEH. Each kit will include, but may not be limited to:
  - 1. Key or combination to open the designated TRM and/or TRV's
  - 2. Human Remains Processing Forms (HRP Form) and Human Remains Processing Log Sheets
  - 3. Certificates of Death
  - 4. Contact numbers of applicable personnel and facilities
  - 5. Pens, pencils, permanent markers, and paper
  - 6. Personal protection equipment (masks, gloves, boots, hand-sanitizers, and other personal protection and hygiene supplies)
  - 7. Disinfecting solution, spray, and/or wipes

- H. The “HRTT Kits” for Human Remains Transportation Team (HRTT) are created. The HRTT Kits will be prepared and maintained by DEH. Each kit will include, but may not be limited to:
1. Personal protection equipment (masks, gloves, boots, overalls, hand-sanitizers, etc.)
  2. Human Remains Transportation Forms (HRT Form)
  3. Human Remains Processing Forms (HRP Form)
  4. Inventory of Personal Effects Forms
  5. Blank photocopies of Certificates of Death Form
  6. Pens, pencils, and permanent markers
  7. Street maps of Guam
  8. Body bags
  9. Clipboards
  10. Disinfecting solution, spray, and/or wipes
- I. The “TRM Kits” for the Temporary Refrigeration Morgue Teams and the “HRTT Kits” for the Human Remains Transportation Team are to be examined every two years, or as necessary, to ensure readiness for use.
- J. DEH shall review the processing steps for human remains at the HRCC (Attachment 10-N) and identify individuals to be assigned to perform internal and/or external embalming of remains when necessary to supplement the morticians.
- K. DPR shall take the necessary steps to finalize the alternate land site for public burial purposes.

## **SECTION 5.2**

### **PANDEMIC CONDITION OF READINESS 3 (PCOR3)**

- A. DPR, DPW, and DPHSS shall submit a monthly report to GHS/OCD on the following:
1. DPW:
    - a. Listing of functional heavy machinery necessary for clearing and grading of land; digging of graves and for mass excavation (i.e., back hoes, excavators, bulldozers)
    - b. Listing of personnel of heavy machinery operators and maintenance personnel from the Highway Safety Division
    - c. Listing of fleet of functional buses under Bus Operations Division
    - d. Listing of personnel from Bus Operations Division
    - e. Listing of personnel from Transportation Maintenance Division
  2. DPR:
    - a. Listing of functional heavy machinery for clearing and grading of land digging of graves and for mass excavation (i.e., back hoes, excavators, bulldozers)
    - b. Listing of departmental personnel
    - c. Identify alternate public burial site
    - d. Provide update as to status of the public burial site for use

3. DPHSS:

- a. Listing of DPHSS personnel to be assigned to this effort
- b. Listing of individuals to perform emergency embalming
- c. Listing of DSC personnel to be assigned to this effort
- d. Listing of inventory and equipment for operations of the HRCC to include refrigeration facilities

OHS/OCD shall compile the reports and provide the report to the DPHSS Director.

- B. The flow chart of the HRCC operation, identifying areas for administrative processing, remains processing and storage, and the transportation of remains at a minimum, is reviewed and revised every January of each year, as necessary by the DEH. DEH shall transmit changes to the operation to the affected external entities and internal divisions of DPHSS.
- C. The Chief Medical Examiner will identify and train licensed medical doctors who can assist OCME to pronounce and certify deaths outside hospital settings.
- D. Each TRM Team will be composed of two individuals. Each team will be scheduled to work an eight-hour shift, unless otherwise directed. The number of teams assembled will be determined by DEH. The source of personnel for the teams shall be from the primary government entities and volunteers identified to operate the TRM. Teams will be identified by position title from the quarterly reports received from GHS/OCD via the DPHSS Director.
- E. Each HRTT will be comprised of three individuals, a driver and two assistants. Each team will be scheduled to work an eight-hour shift, unless otherwise directed. The number of teams assembled will be determined by DEH. The source of personnel for the teams shall be from the primary government entities and volunteers identified to transport human remains. Teams will be identified by position title from the quarterly reports received from GHS/OCD via the DPHSS Director.
- F. DEH shall conduct a training course on the management of mass fatality operations with primary government entities and volunteers within 60 days of entering PCOR3. The course shall include TRM Team, HRTT, and Customer Service Representatives in their respective duties and responsibilities in preparation for their possible activation. At a minimum, they will be instructed on completing applicable forms; operating laptop, printer, and digital camera; and fingerprinting decedents. Additional training shall be conducted as the need is identified.
- G. DPHSS Director shall convene a meeting of all primary government entities to dialogue on the state of preparedness in comparison to the flow chart of the HRCC operation identifying areas for administrative processing, embalming, dressing and casketing of decedents, temporary storage, transportation, and personnel assignments.

- H. The Chief Medical Examiner shall transmit the list of trained licensed medical doctors who will assist OCME to pronounce and certify deaths outside hospital settings to GHS/OHS who in turn shall transmit the list to the DPHSS Director.

### **SECTION 5.3**

#### **PANDEMIC CONDITION OF READINESS 2 (PCOR2)**

- A. DPR, DPW, and DPHSS shall submit a weekly report to GHS/OCD on the following:

1. DPW:
  - a. Listing of functional heavy machinery necessary for clearing and grading of land; digging of graves and for mass excavation (i.e., back hoes, excavators, bulldozers)
  - b. Listing of personnel of heavy machinery operators and maintenance personnel from the Highway Safety Division
  - c. Listing of fleet of functional buses under Bus Operations Division
  - d. Listing of personnel from Bus Operations Division
  - e. Listing of personnel from Transportation Maintenance Division
2. DPR:
  - a. Listing of functional heavy machinery for clearing and grading of land; digging of graves and for mass excavation (i.e., back hoes, excavators, bulldozers)
  - b. Listing of departmental personnel
  - c. Identify alternate public burial site
  - d. Provide update as to status of the public burial site for us
3. DPHSS:
  - a. Listing of DPHSS personnel to be assigned to this effort
  - b. Listing of individuals to perform emergency embalming
  - c. Listing of DSC personnel to be assigned to this effort
  - d. Listing of inventory and equipment for operations of the HRCC to include refrigeration facilities

OHS/OCD shall compile the reports and provide the report to the DPHSS Director.

- B. DPHSS Director shall convene a meeting of all primary government entities to dialogue on the state of preparedness in comparison to the flow chart of the HRCC operation identifying areas for administrative processing, embalming, dressing and casketing of decedents, temporary storage, transportation, and personnel assignments.
- C. Upon completion of “B” above, each government entity shall provide written notice to their personnel of their anticipated assignment to the HRCC. In addition, the GHS/OCD shall transmit a memorandum to each affected employee to further formalize the intent of the plan.

This memorandum will further identify and acknowledge their duties and responsibilities in the event the Mass Fatality Plan is implemented.

- D. The Chief Medical Examiner shall transmit an updated list of trained licensed medical doctors who will assist OCME to pronounce and certify deaths outside hospital settings to GHS/OHS who in turn shall transmit the list to the DPHSS Director.
- E. DEH shall conduct a training course on the management of mass fatality operations with primary government entities and volunteers within 30 days of entering PCOR2 as guided by WHO. The course shall include TRM, HRTT, and CSR teams in their respective duties and responsibilities in preparation for their possible activation. At a minimum, they will be instructed on completing applicable forms; operating laptop, printer, and digital camera; and fingerprinting decedents. Additional training shall be conducted as the need is identified in this condition of readiness since it is unknown how each condition will last.

#### **SECTION 5.4**

##### **PANDEMIC CONDITION OF READINESS 1 (PCOR1)**

- A. GMHA shall notify EOC when morgue space at GMHA and the OCME approaches maximum capacity and the need for additional space is anticipated. In addition, DPHSS shall monitor the operations of the island's mortuaries.
- B. Upon notification by DPHSS RAC, HRCC shall be activated for full operations within 72 hours. DPHSS Director shall identify and assign a HRCC Manager to oversee the operation of the HRCC, who may or may not be DEH personnel.
  - 1. All identified personnel shall report to the HRCC (Dededo Sports Complex) upon being notified of their activation.
  - 2. The HRCC Manager shall convene a meeting of key agencies and stakeholders to prepare for the opening of the HRCC.
  - 3. The HRCC Manager shall conduct on-site training of all personnel assigned to the HRCC.
  - 4. The HRCC Manager shall identify a HRCC Fiscal Manager to collaborate with DPHSS RAC in the coordination of the delivery of the TRM and initiate other procurement activities necessary for the full operations of the HRCC. The HRCC Fiscal Manager shall report directly to the HRCC Manager.
  - 5. The HRCC Manager shall assess operations and determine when the Employee Assistance Program (EAP) shall be activated. The activation of this component of the HRCC shall require personnel to work longer hours and remain on site. The EAP shall provide personnel support in the form of sleeping quarters, shower stalls, laundry, nourishment and telecommunications for personnel and their family, at a minimum. The HRCC Manager may designate staff to implement the EAP.
  - 6. The HRCC Manager shall notify the psychosocial component of the operations and request they be prepared to staff the site upon receiving confirmation from him/her.

- C. The HRCC Manager shall notify EOC once the HRCC is ready to provide mortuary services.
- D. Upon receiving notification from the HRCC Manager, template(s) for public service announcements of telephone hotlines for the pickup and transport of human remain to the HRCC is reviewed and revised, as necessary. Refer to Attachment 10-O. Once finalized, the announcement(s) is released to the public through the JIC EOC with a copy faxed to the HRCC to ensure coordination of services and to officially notify the HRCC Manager that the public is now aware of their services.
- E. The HRCC Manager or his designee shall telephonically notify the directors of island funeral homes once the HRCC begins accepting human remains. They will be provided instructions for retrieving bodies from the HRCC for funeral services.
- F. DPR, DPW, and DPHSS shall submit a daily report to the HRCC Manager on the status of their heavy machinery for clearing of land and digging of graves, operators of such equipment, status of their fleet of vehicles, and an updated roster of bus drivers, as applicable.
- G. Federal assistance is sought through EOC for the activation of DMORT to Guam.

## **SECTION 6.0**

### **STANDARD OPERATING PROCEDURES OF THE HUMAN REMAINS CARE CENTER**

All remains delivered to the HRCC by HRTT or family members will be documented for the purposes of accountability and the issuance of Certificates of Death, and then stored at the facility for their eventual disposition. HRTT will provide transportation of the remains to and from the HRCC. Depending on the origin and cause of death, the deceased may be examined, photographed, tagged, and fingerprinted. When the facility's operation expands to provide mortuary services, the remains may be embalmed; however, the HRCC will modify, limit, or cease certain steps based on available resources or time constraints.

## **SECTION 6.1**

### **HUMAN REMAINS CARE CENTER OPERATIONS**

- A. The operation of the HRCC shall be led by the HRCC Manager, as designated by DPHSS Director or PHA.
- B. The TRM are manned and operated by the TRM Teams at the HRCC. The TRM Teams are to document the receipt and release of all decedents at the temporary facility through the utilization of Certificate of Death, HRP Form, Human Remains Transportation Form (HRT Form), the Inventory and Personal Effects Form, and the Human Remains Processing Log Sheet.

C. Eight separate areas will be established in the HRCC (refer to Attachment 10-N):

1. Delivery Site,
2. Intake Room,
3. Examination Room,
4. Psychosocial Room,
5. TRM,
6. Embalming Room,
7. Dressing and Casketing Room, and the
8. Temporary Holding Room.

The security of the site will be maintained by designated personnel as determined by EOC. The Intake Room is to be occupied by the TRM Teams to interview family members and process documents. The remains will be examined in the Examination Room by the medical examiner. The Psychosocial Room will be used by designated social workers or other crisis workers to console and assist family members. The TRMs will store the remains while awaiting final disposition by funeral homes or the medical examiner.

Embalming will be performed only if the HRCC has the structural capability (i.e, waste disposal, ventilation, equipment, etc.) and the resources, including trained and experienced embalmers, to allow for its safe and proper procedures. Remains in advanced decomposition and/or releasing significant gas will be processed as quickly as possible, which may include by-passing of certain steps.

- D. The TRM Team using their assigned laptop and printer will key in and print all handwritten Certificates of Death of deceased who are prepared and delivered to the HRCC by HRTT that did not originate from GMHA, GRMC, USNH, or OCME. The handwritten Certificate of Death prepared by HRTT is “provisional” until such time the TRM Team transfers the information onto an official Certificate of Death form.
- E. Information necessary to complete the official Certificate of Death at the HRCC by the TRM Team is obtained from the “provisional” death certificate prepared by HRTT Team, or from family members who deliver the deceased to the HRCC. Once the formal certificate is printed, it is forwarded to the medical examiner to officially pronounce and certify the death of the deceased. If a suspicious death is suspected, the medical examiner will annul the printed certificate, by writing the word “VOID” in large letters across the form. The certificate is returned to the TRM Team, whether signed or voided, for transmittal to OVS.
- F. The human remains under suspicion shall be transported to OCME for further disposition.
- G. HRP Form is used to collect general information of the deceased and includes “Identification Placard”, “Toe Tag”, and “Fingerprint Card” that can be detached from the form along then perforated lines. The form, with the exception of the detachable attachments, comes in



triplicate. The TRM Team will retain the original with the first copy going to OVS and the second copy to the family of the deceased. Each HRP Form and its attachments are serialized. Identification Placard, Toe Tag, and Fingerprinting Card, which are also serialized, are used to document the identity of the deceased through photograph and physical examination.

- H. HRTT must complete the HRP Form, Identification Placard, Toe Tag, and Fingerprint Card at the site where the body is collected. HRTT must then place the Toe Tag on the toes of the right foot of the body and insert the Identification Placard inside the body bag with the body. If the right foot is not available, then it is placed on the left foot. Fingers are to be used if toes are unavailable.
- I. HRT Form is used by HRTT to document the pickup and delivery of the remains. The Inventory and Disposition of Personal Effects Form is used to document the items on the deceased at the time of pickup. The Human Remains Processing Log Sheet is used to centralize the information of all remains received and released by the TRM Team at the HRCC.
- J. Human Remains are processed in the order they are received in a “First-In, First Out” (FIFO) method. The medical examiner may prioritize the embalming of a particular body because of its advanced stage of decomposition.

## **SECTION 6.2**

### **PROCESSING OF HUMAN REMAINS**

- A. Algorithm for the processing of human remains delivered to the HRCC is presented in Attachment 10-P, and further detailed below:
  - 1. The deceased is delivered to the HRCC by family:
    - a. Intake Room
      - (1) The photo identification cards of the deceased and family members are examined to confirm identities.
      - (2) The TRM Team completes the HRP Form and the Inventory and Disposition of Personal Effects Form, and copies of the forms are provided to the family.
      - (3) The name of the deceased is written on the Identification Placard, Toe Tag, and Fingerprint Card on the HRP Form. They are detached from the HRP Form and provided to the medical examiner.
      - (4) The Certificate of Death is completed with the assistance of family members and forwarded to the medical examiner for signature. After signed or voided by the medical examiner, the death certificate is stapled to the first copy of the HRP Form

to be forwarded to OVS. These documents must be filed in a secured location.

- (5) The original HRP Form is stapled to the Fingerprint Card that is returned from the medical examiner and filed with the TRM Team and stored in a secured location.
- (6) The information of the deceased is recorded in the Human Remains Processing Log Sheet.

b. Examination Room

- (1) The deceased is placed on a gurney with assistance of available HRTT or the TRM Team and wheeled into the Examination Room.
- (2) The toe tag is received from the TRM Team and placed on any of the digits of the right foot. If the right foot is not available, then it is placed on the left foot. Fingers are to be used if toes are unavailable.
- (3) The Serialized Identification Placard is received from the TRM Team and placed on the chest of the deceased. A single photograph of the head and placard is taken. The medical examiner or designee ensures the serial number of the placard is visible in the photograph.
- (4) The deceased is examined to rule out foul play, fingerprinted, and bagged with the assistance of HRTT or the TRM Team. The Identification Placard is placed inside the body bag. Corresponding serial number is written clearly in large print on the outside of the body bag near the foot of the bag. The date and cause of death are also written on the outside of the body bag.
- (5) The Fingerprint Card is returned to the TRM Team which will be attached to the original HRP Form for filing in a secured location.
- (6) The deceased is wheeled out by HRTT to the TRM for storage.

2. The human remains delivered by HRTT that did not originate from hospitals or medical examiner:

a. Intake Room

- (1) The TRM Team will receive the completed HRP Form, Fingerprint Card, Inventory and Disposition of Personal Effects Form, and provisional Certificate of Death from HRTT.
- (2) The TRM Team formalizes "Provisional" Certificate of Death received from HRTT. The information is transferred into the computer and printed on to the

official Certificate of Death. The certificate is then forwarded to the medical examiner for signature.

- (3) The Fingerprint Card is stapled together with the original HRP Form and HRT Form and filed by the TRM Team in a secured location.
- (4) The signed or voided Certificate of Death received from the medical examiner is stapled to the first copy of the HRP Form for transmittal to OVS and filed in a secured location.
- (5) The information of the deceased is recorded in the Human Remains Processing Log Sheet.

b. Examination Room

- (1) The deceased is placed on a gurney with assistance of available TRM Team and wheeled into the Examination Room.
- (2) The number and name on the Identification Placard and the Toe Tag on the body is compared with the original HRP Form received from HRTT for the confirmation of identity.
- (3) The Identification Placard included with the deceased is placed on the chest of the remains. The medical examiner or designee ensures the serial number of the placard is visible in the photograph.
- (4) The deceased is examined to rule out foul play.
- (5) The deceased is then bagged with the assistance of the TRM Team or HRTT. The Identification Placard is placed inside the body bag. Corresponding serial number is written clearly in large print on the outside of the body bag near the foot of the bag. The date and cause of death are also written on the outside of the body bag.
- (6) HRTT or the TRM Team will wheel out the deceased to the TRM for storage.

3. Human remains are delivered by HRTT from hospitals or medical examiner:

a. Intake Room

- (1) The completed HRP Form, Fingerprint Card, Inventory and Disposition of Personal Effects Form, and Certificate of Death are received by the TRM Team from HRTT.
- (2) The original Certificate of Death is forwarded to the medical examiner for pronouncement of death, if not done so already by the attending physician.

- (3) The completed Fingerprint Card is stapled together with the original HRP Form and HRT Form and filed by the TRM Team in a secured location.
- (4) The signed Certificate of Death received from the medical examiner is stapled to the first copy of the HRP Form that is transmitted to OVS and filed in a secured location.
- (5) The information of the deceased is recorded in the Human Remains Processing Log Sheet.

b. Examination Room

- (1) The deceased is placed on gurney with assistance of available TRM Team and wheeled into the Examination Room.
- (2) The identification Placard and Toe Tag inside the body bag is compared to the death certificate for confirmation of identity.
- (3) A photograph of the deceased is taken with an Identification Placard placed on the chest of the deceased. The medical examiner or designee ensures the serial number of the placard is visible in the photograph.
- (4) The deceased is examined to rule out foul play.
- (5) The body is then re-bagged with the assistance of the TRM Team or HRTT. The Identification Placard is placed back inside the body bag. Corresponding serial number is written clearly in large print on the outside of the body bag near the foot of the bag. The date and cause of death are also written on the outside of the body bag.
- (6) The HRTT or the TRM Team will wheel out the deceased to the TRM for storage.

B. The bodies examined by the medical examiner deemed suspicious as to the cause of death are transported to OCME for autopsy by HRTT.

C. All operational documents are filed in a secured location.

D. The digital camera used to photograph the deceased by the medical examiner is given to the TRM Team when its memory card is full. The camera is returned to the medical examiner after the TRM Team downloads the images into the hard drive of the laptop. The TRM Team creates a backup file of the photographs by copying images into flash drive(s). Files are labeled and organized by the dates when the photographs were taken.

- E. The original Certificates of Death and corresponding copies of HRP Forms are picked up by OVS for the processing and issuance of certified Certificates of Death and Disposition Permits to families.

### **SECTION 6.3**

#### **DEATHS OCCURRING OUTSIDE THE HOSPITAL**

- A. Individuals who die from pandemic related illness or other causes outside GMHA, GRMC, or USNH may be delivered directly to the morgue. Such transportation may be conducted by family members of the deceased or HRTT may be contacted to pick up and transport the deceased. This will not be applicable to suspicious death or foul play which will require the action and involvement of GPD and OCME or his designee.
- B. DPHSS will establish a telephone hotline for the public to call if they wish to have their deceased family member(s) picked up by HRTT for transport to the HRCC. The hotline number will be disseminated to the public through public announcements issued by the JIC. The hotline and other public announcements will provide instructions on when, where, and how the human remains are to be delivered if performed by family members, refer to Attachment 10-N.
  - 1. HRTT personnel picking up the deceased are to complete the HRT Form, “Provisional” death certificate, and the HRP Form, and the Inventory and Disposition of Personal Effects Form with the assistance of family members and the photo identification card of the deceased.
  - 2. HRTT detaches the Toe Tag and Identification Placard from HRP Form when the form is completed. The Toe Tag is attached to any of the digits of the right foot. If the right foot is not available, then it is placed on the left foot. Fingers are to be used if toes are unavailable and then the body is bagged. The Identification Placard is inserted inside the body bag. The serial number of HRP Form, possible cause of death and date are written on the outside of the body bag at the foot of the deceased.
  - 3. A second copy of the completed HRP Form is provided to the family of the deceased.
  - 4. Suspicious death is reported to GPD by HRTT and the body is not collected.

### **SECTION 6.4**

#### **OFFICE OF VITAL STATISTICS, DPHSS**

- A. Office of Vital Statistics (OVS) will continue to operate from its existing office. The office will operate 24/7 when necessary, at the discretion of the DPHSS Director.

- B. Funeral homes are not permitted to pick up the Certificates of Death at GMHA, GRMC, USNH, OCME, or the HRCC when the Mass Fatality Plan is implemented. Instead, OVS will be responsible for picking up the Certificates of Death at the HRCC. The frequency of visits by OVS to pick up these documents will be based on need, as determined by the Territorial Registrar in coordination with the TRM Team.
- C. The Territorial Registrar is to request for the activation of support staff to assist in the processing of Certificates of Death and Burial-Transit Permits when the need arises. Upon notification, designated personnel from DPHSS are to report to the Territorial Registrar to assist OVS. Work schedules for all personnel assigned to OVS are managed by the Territorial Registrar.
- D. OVS is tasked to contact the applicable funeral home(s) selected by the family, as indicated in HRP Form, when the Certificate of Death is processed. Burial-Transit Permit (Attachment 10-Q) is also prepared and released to the funeral home if the location of the burial/cremation is confirmed. OVS will contact the alternate funeral home if the selected primary provider is unable or unwilling to provide mortuary services. For whatever reason, if the alternate funeral home indicated in the HRP Form is also unavailable to accept the body, OVS is to contact other mortuary providers.
- E. Family of a deceased person that cannot, or will not, seek the services of a funeral home will be required to release the deceased to DPHSS for proper disposition. DPHSS will determine such disposition and prepare the Burial-Transit Permit.
- F. OVS is to immediately notify DPHSS CPHO when funeral homes are collectively unable to accept decedents in a timely manner because of the overwhelming number of deaths and limited resources. The DPHSS CPHO shall advise the DPHSS Director of this for further disposition.

## **SECTION 6.5**

### **MASS EMBALMING AND CASKETING OF HUMAN REMAINS**

- A. The HRCC is activated for mass processing of human remains when the Director of DPHSS or PHA identifies a HRCC Manager and instructs him/her to establish the HRPC.
- B. DPHSS expands the operation of the HRCC for mass embalming and casketing by establishing the facility in accordance with the floor plan and layout provided in Attachment 10-R.
  - 1. Assistance will be requested from EOC to assist in the mobilization and establishment of resources for the activation of the HRCC to perform mass embalming and casketing.
  - 2. Upon direction from the public health authority, personnel to perform emergency embalming are contacted by DEH and instructed to report to the HRCC.

3. Through collaboration with the JIC, DPHSS will issue public announcements (Attachment 10-S) informing the public and funeral homes of the activation of the HRCC for mass embalming and casketing of deceased.
- C. The embalming of the deceased will occur in the Embalming Room after the body is received from the Examination Room.
1. The Embalming Room is supervised by a trained and experienced mortician, if possible. If none is available, then the HRCC Manager shall assign one.
  2. Human remains are embalmed intravenously and/or externally.
- D. The casketing of remains will occur in the Dressing and Casketing Room upon receipt from the Embalming Room.
1. The Dressing and Casketing Room is supervised by a trained and experienced mortician, if possible. If none is available, then the HRCC Manager shall assign one.
  2. The psychosocial group assigned to the HRC will assist the morticians of the facility by collecting articles of clothing the family wishes to dress the deceased when a temporary mortuary becomes operational for the mass embalming of human remains.
- E. A temporary Holding Room operated by HRTT will be utilized as the temporary storage site of the embalmed deceased awaiting transport to their final disposition site.
- F. Embalming will not be performed at the HRCC if resources, including proper infrastructure, are not available.

## **SECTION 6.6**

### **TRANSPORT OF EMBALMED HUMAN REMAINS**

HRTT transports the embalmed remains to the cemetery after receiving the Burial-Transit Permit from OVS. HRT Form is used by HRTT for recording deliveries to cemeteries. The form is submitted to the TRM Team upon returning to the HRCC for recording purposes.

## **SECTION 6.7**

### **FUNERAL HOME OPERATION**

- A. Funeral homes will not be permitted to pick up the Certificates of Death from the hospital or the HRCC for hand delivery to OVS once the Mass Fatality Plan is activated. OVS will instead retrieve the Certificates of Death and contact the funeral homes when these certificates are processed and ready for release to the funeral homes.



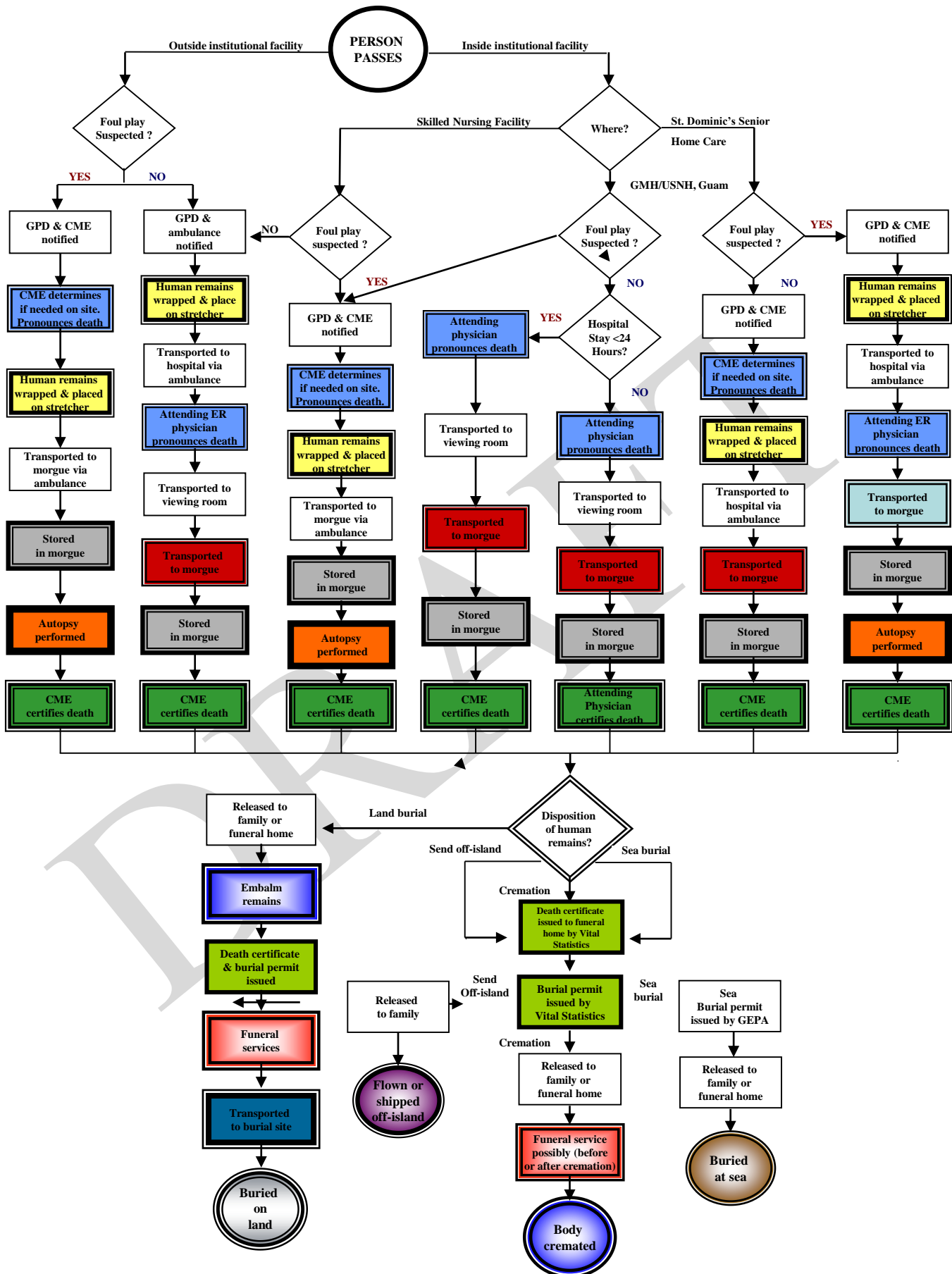
- B. It is the responsibility of a funeral home to notify and educate individuals and family members with whom they have existing funeral contracts regarding the HRP Form to ensure the families indicate the appropriate service provider in the form.
- C. A funeral home is to retrieve the Certificate of Death when contacted by OVS. If the site of burial or cremation is already determined, the information is to be provided to OVS.
- D. A funeral home that accepts the remains of a deceased person that was not accepted by the primary and alternate providers listed in HRP Form must contact the family of the deceased and notify them of the change.
- E. If the family of the deceased so wishes, funeral homes at a minimum are required to provide a wooden casket for the deceased that meets the specifications provided in Attachment 10-E.
- F. A funeral home that is no longer capable of continuing operations, or meeting public demand, will notify OVS of the situation.

## **SECTION 6.8**

### **CEMETERY OPERATION**

- A. The public cemetery is to be utilized for the burying of all deceased individuals that are not cremated or buried elsewhere. The DPHSS Director or the PHA shall activate individuals identified as emergency grave diggers in the event DPR is unable to provide personnel to perform such functions. As indicated in the Mass Fatality Plan, DPW and other identified entities will assist in this effort to include additional manpower and equipment resources.
- B. Through activation of the Emergency Health Powers Act and as indicated in the Executive Order issued by the Governor of Guam, when burial spaces become limited at the public cemetery, multiple family members may be buried in a single grave. The minimum distance between each grave may be shortened if necessary to maximize burial space.
- C. Mass burials will be implemented only when absolutely necessary, and if implemented, DPHSS in collaboration with DPR and DPW will make every reasonable effort to create and retain records of those buried under such conditions and the locations of such burial site(s).

# ALGORITHM FOR NORMAL MANAGEMENT OF HUMAN REMAINS



## LIMITING FACTORS AND POSSIBLE SOLUTIONS FOR CORPSE PROCESSING

STEPS		REQUIREMENTS	LIMITING FACTORS	POSSIBLE SOLUTIONS
1	Death Pronouncement	Person authorized to perform task	Authorized person must be contacted if death occurs at home	Provide public education on accessing authorized person
			Availability of authorized person	On-call system 24/7
2	Death Certification (if different person from "Step 1")	See "Step 1"	See "Step 1"	Authorize one person or persons to perform Steps 1 and 2
3	Human remains Wrapped	Person trained to perform task	Availability of personnel to perform task at site of death, including homes	Train or expand role of current staff
		Body bags	Availability of body bags	Provide service in homes in conjunction with Death Pronouncement (Step 1) and Transportation to Morgue (Step 4)
4	Transporation to Morgue	In hospital: Trained staff and stretcher	Availability of human and physical resources	In hospital: Train additional staff
				Outside hospital: Trained or informed person, stretcher, and vehicle for transportation
		Outside hospital: Trained or informed person, stretcher, and vehicle for transportation		Retain and collect old stretchers in storage
				Alternate equipment and its suppliers to be used in place of stretcher (trolley)
5	Morgue Storage	Suitable facility to maintain human remains at 4-8 degrees Celsius	Capacity of suitable facilities	Identify and plan for possible temporary morgue sites
6	Autopsy (if required)	Person qualified to perform task and suitable facility with equipment	Availability of human and physical resources	Educate and inform physicians and families that autopsy is not required for confirmation of pandemic as cause of death
7(a)	Cremation	Suitable vehicle to transport from morgue to crematorium	Capacity of crematorium and speed of process	Identify alternate vehicles for mass transport
		Availability of cremation service	Availability of medical examiner or crematorium or other authorized person or facility to officially issue certificate or perform cremation	Examine capacity of crematoriums
		Cremation certificate		Develop plan for appropriate storage options if crematorium becomes backlogged
7(b)	Embalming	Suitable vehicle to transport from morgue to embalming site	Availability of human and physical resources	Potential alternate sources to perform task (i.e., retirees, students in training)
		Trained and experienced person		Identify alternate vehicles for mass transport
		Embalming equipment and supplies	Capacity of facility and speed of procedure	Stockpile or develop a rotating 6 month inventory of essential equipment and supplies
		Suitable location		Find workers willing to provide task in emergency

8	Issuance of Death Certificate and Burial Permit	Person authorized to perform task	Availability of authorized person	On-call system 24/7
9	Funeral Services	Casket	Availability of caskets and urns	Contact suppliers to determine lead time for casket and urn manufacturing and plan for rotating 6 month inventory
		Cremation urn		
		Funeral Director	Availability of location for service and visitation	Determine capacity to provide service and identify additional sites
		Appropriate location		
10	Transportation to burial site or temporary holding facility	Suitable vehicle and driver	Availability of human and physical resources	Identify alternate vehicles for transport, and consider using volunteer drivers
11	Temporary holding facility	Access to and space of facility	Capacity accessibility of temporary holding facility	Expand capacity by increasing sites in number and/or size
12	Land Burial	Grave digger	Availability of grave diggers	Identify sources of additional workers to dig
		Space in cemetery	Availability of space in cemeteries	Identify available space to create cemetery
13	Sea Burial	Sea burial permit	Availability of person authorized to issue burial permit	Plan expedited burial permit processing
		Suitable sea-going vessel and captain	Availability of sea-going vessels and captains to perform the service	Determine capacity to provide service and identify additional vessels and captains
14	Shipped or Flown Off-island	Suitable airplane and sea-going vessel to transport	Availability of air flights or sea-going vessels to perform the service	Determine capacity to provide service and identify alternative non-traditional means of transport

## LIST OF GUAM FUNERAL HOMES AND MORTICIANS

Name of Funeral Homes	Contact Name	Contact Number	Name of Mortician Contact Number
<b>Ada's Mortuary</b> P.O. Box 1214, Hagatna, Gu 96932	Vicente R. "Rick" Ada , Funeral Director	(T) 477-1311  (F) 477-1211	Vicente "Rick" Ada (T) 477-1311
<b>Guam Memorial Funeral Home</b> P.O. Box GK, Hagatna, Gu 96932	Len Mayer, Director  Sheryl Simpkins, Vice- President	(T) 734-9835	Melanie Blythe  (C) 858-8151
<b>Jerry's Funeral Service</b>  128 Tilit Court, Dededo, Gu 96929	Jerry Santos	(C) 747-5373	c/o Ada's Mortuary
<b>Our Lady of Peace</b> P.O. Box 598, Hagatna, Gu 96932	Christine Sellew, Funeral Director	(T) 633-8426 (T) 633-8430 (C) 687-8437	Alicia Tulles  (C) 482-8185
<b>San Agustin's Funeral Home</b> P.O. Box 915, Hagatna, Gu 96932	Faith Escalona, Director of Operations	(T) 647-7111  (T) 647-7113	Nancy Quinata  (C) 788-6262

ATTACHMENT 10-C

## LIST OF REQUIRED MATERIALS AND POSSIBLE VENDORS

Description	Name of Vendor	Contact	Cost	Qty/Unit	REMARKS
<b>Embalming Powder</b>	<b>Kelco Supply Company</b> 20000 176th St. NW, Big Lake, MN 55309	(T): 1-800-328-7720	\$66.70	15 lb Drum	Vendor of Local Funeral Homes may or may not accept Government of Guam Purchase Orders
			\$106.84	30 lb Drum	
			\$207.00	50 lb Drum	
	<b>Hepburn Superior</b> 314 W. Katella Ave, Orange, CA 92867	(T): 1-800-626-0584 (F): 1-714-538-6519	\$5.87	1 lb Bottle	A131/171 - 4-Sure Embalming Powder
			\$153.18	45 lb Drum	A131/17 - 4-Sure Embalming Powder
					Vendor of Local Funeral Homes may or may not accept Government of Guam Purchase Orders
<b>Embalming Fluid</b>	<b>Kelco Supply Company</b> 20000 176th St. NW, Big Lake, MN 55309	(T): 1-800-328-7720	\$66.70	16 oz Bottles	Vendor of Local Funeral Homes may or may not accept Government of Guam Purchase Orders
			\$65.40	CASE	
<b>Body Bags</b>	<b>Kelco Supply Company</b> 20000 176th St. NW, Big Lake, MN 55309	(T): 1-800-328-7720	\$18.75	EA	No polyvinyl chloride
					Vendor of Local Funeral Homes may or may not accept Government of Guam Purchase Orders
	<b>M.D. Wholesale</b> 255 Farenholt Avenue Oka Tamuning, GU 96913	(T): 649-5833	\$21.62	EA	Chlorine free/non-vinyl/zipper adult
			\$78.48	EA	6 handle - adult
		(F): 649-5830	\$24.66	EA	White - curved zipper
			\$36.27	EA	White - straight zipper
	<b>Hepburn Superior</b> 314 W. Katella Ave, Orange, CA 92867	(T): 1-800-626-0584 (F): 1-714-538-6519	\$52.90	EA	B230/17 -Disaster pouch; black; zipper
			\$10.35	EA	B230/15-Burial pouch; baby:white
			\$16.10	EA	B230/19-Burial pouch; plastic zipper; white
<b>Polyethylene Plastic Sheets</b>	<b>Benson</b> P.O. Box 6157 Tamuning, GU 96931	(T): 477-7562	\$97.74	ROLL	20x100 - 6 mil - color: white
	<b>Oceanic Lumber</b> Airport Road, Tamuning, GU	(T): 646-9111	\$126.50	ROLL	20x100 -10 mil - color: black
<b>Gurney/Stretchers</b>	<b>MedPharm</b> P.O. Box 11864 Tamuning, GU 96931	(T): 632-6000 (F): 632-9000	\$2,254.00	EA	Stretcher 650
			\$1,707.75	EA	Stretcher 1050
			\$2,096.11	EA	Stretcher 1250
			\$1,420.54	EA	Stretcher 1025

## LIST OF REQUIRED MATERIALS AND POSSIBLE VENDORS

Description	Name of Vendor	Contact	Cost	Qty/Unit	REMARKS
<b>Cardboard Cremation Caskets</b>	<b>Kelco Supply Company</b> 20000 176th St. NW, Big Lake, MN 55309	(T): 1-800-328-7720	\$26.45	EA	Vendor of Local Funeral Homes may or may not accept Government of Guam Purchase Orders
					Vendor of Local Funeral Homes may or may not accept Government of Guam Purchase Orders
	<b>Hepburn Superior</b> 314 W. Katella Ave, Orange, CA 92867	(T): 1-800-626-0584 (F): 1-714-538-6519	\$13.69	EA	B150/195-one piece carton w/hand holes
			\$15.58	EA	B150/1952-two piece carton w/hand holes
			\$26.16	EA	B150/3811-cremation cartons w/long board
					Vendor of Local Funeral Homes may or may not accept Government of Guam Purchase Orders
			\$19.26	EA	B150/3980-Cremation cartons w/short board



## LIST OF REQUIRED MATERIALS AND POSSIBLE VENDORS

Description	Name of Vendor	Contact	Cost	Qty/Unit	REMARKS
<b>Cardboard Cremation Caskets</b>	<b>Hepburn Superior</b> 314 W. Katella Ave, Orange, CA 92867	(T): 1-800-626-0584  (F): 1-714-538-6519	\$15.81	EA	B150/3820-Cremation cartons w/out board  Vendor of Local Funeral Homes may or may not accept Government of Guam Purchase Orders
<b>Refrigeration Containers</b>	<b>Matson Navigation</b> 520 Chorito Blvd., Ste. 301, Asan, GU 96910	(T): 475-5961          Linda Ramos  <a href="mailto:lramos@matson.com">lramos@matson.com</a>	\$75.00	DAILY	40 ft. container w/o wheels
			\$175.00	DAILY	40 ft container w/wheels
			\$350.00	ONE TIME FEE	Side lifter service to offload container at site (cost is for initial delivery & return of container)
			\$100.00	DAILY	Generator (stock is limited)
			\$100.00	DAILY	Generator w/chasis
			\$275.00	DAILY	Reefer container/chasis/generator
			*Note electrical requirements for generator: 220v or 440v		
			*Generator size - 30 gallon/diesel fuel (mounted to container)		
			*Number of containers on hand is dependant on the availability of refrigeration containers at the time of request.		
			*1-2 weeks advance notice must be made to allow for prep time for		
<b>Dry Ice</b>	<b>Island Equipment Company</b> Route 2A Agat, GU 96915	(T): 565-4574  (F): 565-4971  Linda Templo, Store Mgr	\$2.15	1-49 lbs	*Note the Airlines is priority as per Linda Store Mgr (largest amount issued to Airlines is 1,000 LBS)
			\$2.05	50-175 lbs	*Call in advance for 50 LBS or more; cooler required for pick up. Dry Ice is produced daily.
			\$1.85	176-OVER lbs	
	<b>Guam Isla LP Gas</b> 330 Chalan Pale Ramon Lagu, Yigo, GU 96929	(T): 653-4887/8 (F): 653-4889  <a href="mailto:islagas@gtepacific.net">islagas@gtepacific.net</a>	\$2.95	PER GALLON	NOTE: Fuel used for cremation - average 60 gals per person - use of a 1,000 gal tank.  NOTE: Fuel cost is based on current fuel price at the time of purchase. Includes installation of tank
		(T): 646-9067/8	\$4,400.00	1 EA - 1,000 GAL TANK	

## LIST OF REQUIRED MATERIALS AND POSSIBLE VENDORS

Description	Name of Vendor	Contact	Cost	Qty/Unit	REMARKS
<b>LP Gas</b> (Liquid Petroleum Gas)	<b>Pacific LP Gas</b> 145 Ypao Rd., Tamuning, GU 96913	(F): 649-8668  <a href="mailto:pacgas@ite.net">pacgas@ite.net</a>	\$3.00	PER GALLON	NOTE: Fuel cost is based on current fuel price at the time of purchase.
	<b>South Pacific Petroleum Corp/South Pacific Gas</b> 816 North Marine Corp. Dr., 2nd Floor Eva Bldg., Tamuning, GU 96913	(T): 647-7600	\$3.20	PER GALLON	NOTE: Fuel cost is based on current fuel price at the time of purchase. Includes installation of tank

## LIST OF REQUIRED MATERIALS AND POSSIBLE VENDORS

Description	Name of Vendor	Contact	Cost	Qty/Unit	REMARKS
<b>Personal Protective Equipment (PPE)</b>	<b>Hepburn Superior</b> 314 W. Katella Ave, Orange, CA 92867	(T): 1-800-626-0584	\$18.98	EA	B233/1235 - PROTECTAIDE PERSONAL PROTECTION PACK CONTAINS: 1 Impervious Long-sleeve, Open - back, Tie-back Jumpsuit, Large; 1 pair "Super High Risk" 12" 14 mil powder-free medical gloves. 1 Fluid Shield Procedure mask with wrap around Splashguard Visor; 1 Pair impervious high-top shoe covers; 1 Antimicrobial hand wipe; 1 Biohazard waste bag and 1 Black waste bag.
			\$14.95	EA	B233/1554 - Economy Kit Contains: Open Bag Full Length Gown, Mask, Gloves, Shoe Covers, Glasses, Bio-Hazard Bag, And Surgical Cap.
			\$4.14	EA	B233/8570 - PERSONAL PROTECTION GOWNS; REGULAR
			\$2.99	EA	B233/8572 - PERSONAL PROTECTION GOWNS; LARGE
			\$114.43	EA	B233/110 - ISOLATION GOWNS (BOX OF 50)
			\$0.86	EA	B233/1382 - SHOE COVERS (EACH)
			\$6.50	EA	B233/1383 - JUMPSUITS; SMALL
			\$6.50	EA	B233/1384 - JUMPSUITS; MEDIUM
			\$6.50	EA	B233/1385 - JUMPSUITS; LARGE
			\$6.50	EA	B233/1386 - JUMPSUITS; X-LARGE
			\$6.90	EA	B233/1387 - JUMPSUITS; XX-LARGE
			\$7.36	EA	B233/1388 - JUMPSUITS; XXX-LARGE
			\$7.99	EA	B233/1389 - JUMPSUITS; XXXX-LARGE
		(F): 1-714-538-6519	\$0.46	EA	B233/1111 - DISPOSABLE APRON (EACH)
			\$6.44	EA	B233/1555 - PLASTIC BIB STYLE APRON
			\$0.23	EA	B233/1561 - HEAD COVER (EACH)
			\$4.89	EA	B233/841 - PLASTIC COVERALLS; SMALL
			\$5.12	EA	B233/842 - PLASTIC COVERALLS; MEDIUM

## LIST OF REQUIRED MATERIALS AND POSSIBLE VENDORS

Description	Name of Vendor	Contact	Cost	Qty/Unit	REMARKS
			\$5.29	EA	B233/843 - PLASTIC COVERALLS; LARGE
			\$5.64	EA	B233/844 - PLASTIC COVERALLS; X-LARGE

## LIST OF REQUIRED MATERIALS AND POSSIBLE VENDORS

Description	Name of Vendor	Contact	Cost	Qty/Unit	REMARKS
Personal Protective Equipment (PPE)	Hepburn Superior 314 W. Katella Ave, Orange, CA 92867	(T): 1-800-626-0584	\$2.30	EA	B233/6080 - PLEATED MASK W/PLASTIC EYE SHIELD
			\$0.35	EA	B233/6102 - PLEATED MASK
			\$23.00	EA	B233/15510 - FACE SHIELD
		(F): 1-714-538-6519	\$4.03	EA	B233/9913 - ODOR NUISANCE MASK
			\$6.04	EA	B233/1381 - LAB COATS; LARGE
			\$6.50	EA	B233/13814 - LAB COATS; X-LARGE
					Vendor of Local Funeral Homes may or may not accept Government of Guam Purchase Orders
	Safety 1st 145 E. Harmon Industrial Park Unit A. Tamuning, GU 96913	(T): 649-6440	\$39.27	20 PER BX	1870 PROTECTIVE RESPIRATORY & SURGICAL
			\$19.80	20 PER BX	8210- N95 PARTICULATE RESP BOX
			\$147.40	8 BXS PER CS (20 PER BX) 1 CS	8210- N95 PARTICULATE RESP
		(F): 649-4997	\$3.50	EA	SG3 DIRECT VENT. GOGGLES
			\$11.50	EA	STEALTH TEAL/GREY W/CLR XTR (ANTIFOG GOGGLES)
			\$12.99	100/BX	LATEX GLOVES MED
			\$12.99	100/BX	LATEX GLOVES LRG
			\$28.50	EA	NAVY SS SMALL REG (38-40) -COVERALLS
			\$28.50	EA	NAVY SS MED REG (42-44) - COVERALLS
			\$28.50	EA	NAVY SS LRG REG (46-48) - COVERALLS
			\$28.50	EA	NAVY SS XL REG (50-52) - COVERALLS
			\$1.50	EA	TYVEK SHOE COVER GRY
			\$125.00	100/CS	TYVEK SHOE COVER GRY
			\$9.99	EA	CLEAR FACESHIELD # 15033 - HEAD GEAR FACESHIELD

## LIST OF REQUIRED MATERIALS AND POSSIBLE VENDORS

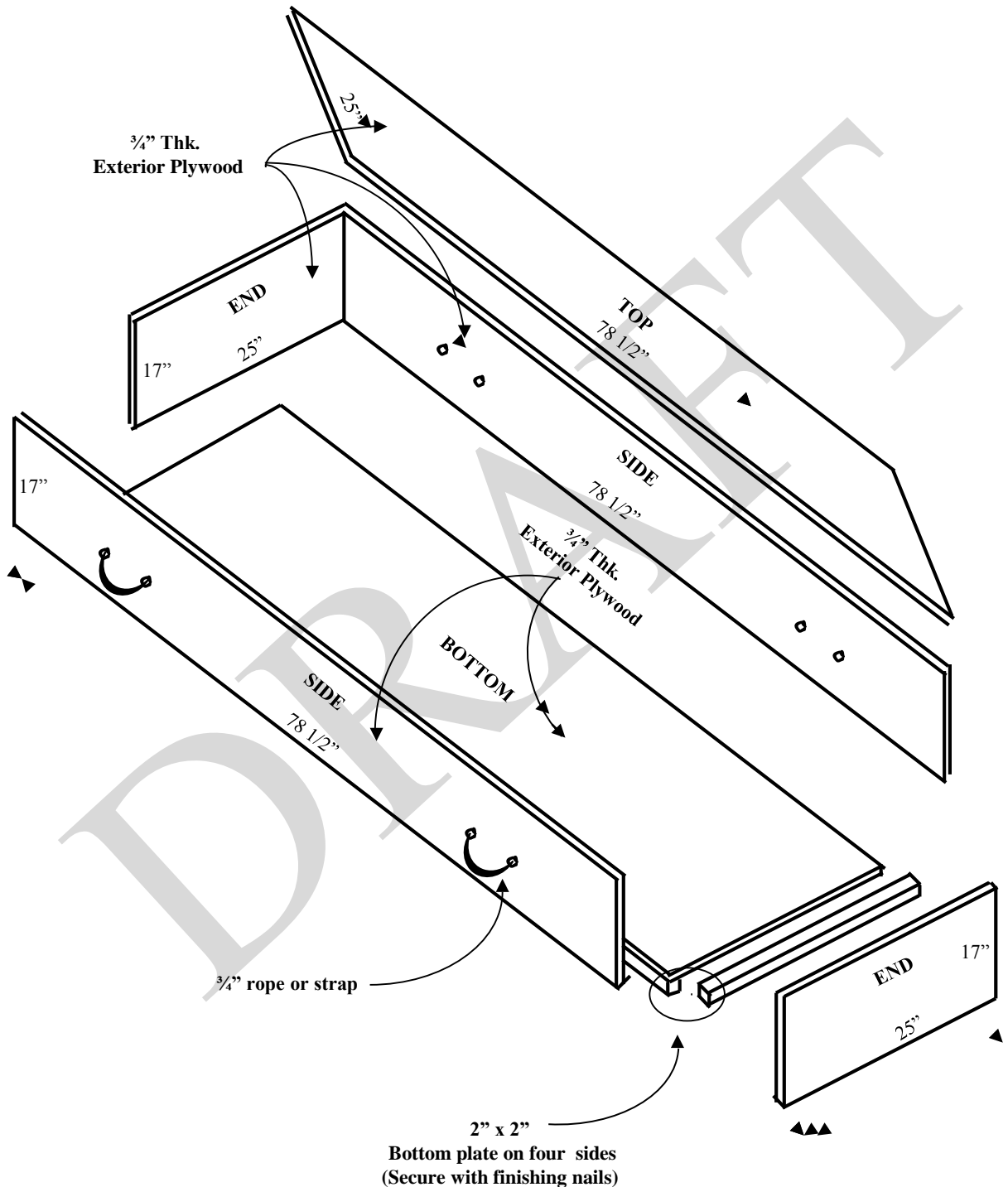
Description	Name of Vendor	Contact	Cost	Qty/Unit	REMARKS
<b>Personal Protective Equipment (PPE)</b>	<b>Safety 1st</b> 145 E. Harmon Industrial Park Unit A. Tamuning, GU 96913	(T): 649-6440	\$6.99	EA	CLEAR FACESHIELD 20X10X.040
			\$112.48	EA	SER FULLFACE RESP SMALL - AVAILABLE IN
			\$2.50	EA	13" SOLVEX GLOVES SIZE 9/9.5 - AVAILABLE IN 9.10,11 - (RUBBER GLOVES - CHEMICAL)
		(F): 649-4997	\$9.25	EA	18" SOLVEX GLOVES SIZE 9 - AVAILABLE IN 9/10,11 - (RUBBER GLOVES - CHEMICAL)
			\$14.00	EA	RAINBOOT: NON-ST 16" SZ 6 - ALL SIZES SAME PRICE - (RUBBER BOOTS)
			\$9.99	EA	APRON VINYL HVY DUTY, GREEN 20ML - (RUBBER APRON)
	<b>M.D. Wholesale</b> 255 Farenholt Avenue Oka Tamuning, GU 96913	(T): 649-5833	\$23.49	BX	Fluid shield Earloop Procedure Masks - Blue (40/BX)
			\$48.09	BX	N95 Mask/Respirator (20/BX)
			\$187.19	CS	Safety/Protective goggles (50/CS)
		(F): 649-5830	\$64.99	CS	Purell Sanitizer/ Flip cap 4.5 oz. (24/CS)
			\$5.50	BX	Disposable Latex gloves powder free (100/BX)
			\$238.00	CS	TYVEK COVERALLS - SM (25/CS)
<b>Personal Protective Equipment (PPE)</b>	<b>M.D. Wholesale</b> 255 Farenholt Avenue Oka Tamuning, GU 96913	(T): 649-5833	\$238.00	CS	TYVEK COVERALLS -M (25/CS)
			\$238.00	CS	TYVEK COVERALLS-LG (25/CS)
			\$238.00	CS	TYVEK COVERALLS-XLG (25/CS)
			\$280.71	CS	TYVEK BOOT COVERS ELASTIC TOPS (200/CS)
			\$17.65	EA	Vionex Anti microbial Liquid Soap Pump Bottle (18 oz)
		(F): 649-5830	\$162.62	CS	Face Shield with mask ties (100/CS)
			\$35.99	PK	Rubber Gloves (SM/M/LG) - 12/PK
			\$44.27	PR	Rubber Boots (SM/M/LG)
			\$29.75	PK	Disposable Apron (50/PK)

## LIST OF REQUIRED MATERIALS AND POSSIBLE VENDORS

Description	Name of Vendor	Contact	Cost	Qty/Unit	REMARKS
			\$27.29	EA	Rubber Apron 42/36" Chemical Resistant
Caskets	Casketxpress	(T): 1-800-550-7262	\$803.85	EA.	Price range starting from \$699.00 - \$1199 and up
Death Certificates	Pacific Bancnote Company 15915 Carrie Drive Suite 110, Grass Valley, CA 95949-6575	(T): 530-271-1071	\$7,388.75	25,000 EA.	Base Stock Vital Record Certificate 8 1/2 x 11 Note cost is inclusive of shipping charges based on UPS (7 Bus. days) Sole source off-island (Cost for security paper only)
		(F): 530-271-1073			
	Elite Printing P.O. Box 22349 Barrigada, GU 96921	(T): 649-2677/3077  (F): 649-7666	\$85.00	10 PADS	1,000 each (10 pads) 12 1/2 x 4 1/2
Burial Transit Permit	Elite Printing P.O. Box 22349 Barrigada, GU 96921	(T): 649-2677/3077  (F): 649-7666	\$85.00	10 PADS	1,000 each (10 pads) 8 1/2 x 11 - Printing only



# RECOMMENDED SPECIFICATIONS FOR WOODEN CASKET



Source: <https://www.northwoodscasket.com/build-your-own-casket>

**LIST OF GUAM CEMETERIES**

	Cemeteries	Contact Name	Contact Number	Space Available		Remarks
				Ground	Crypts	
1	Calvo Cemetery	Leonard Calvo	(T) 671 472-6852	Unknown	Unknown	Private, Family Cemetery
2	Custino (East Agana)	Mark Cruz	(T) 671 472-8082 (C) 671 486-2789	Unknown	Unknown	Baptist Church Cemetery, operated by Agana Heights Baptist Church
3	Guam Memorial Park, Inc. (Barrigada)	Len Mayer	(T) 671 734-9835	3188	40	Private, Commercial Cemetery
		Sheryl Simpkins				
4	Guam Windward Memorial	Teresa "Tess" Salas	(T) 671 989-8090	7000	(ground and crypt availability combined)	Private, Commercial Cemetery
5	Holy Cross "Togcha" Cemetery (Yona)	Owen Bollinger, Administrator	(T) 671 477-9329	792*	250*	Catholic Cemetery handled by the Archdiocese of Guam
6	Limtiaco Cemetery "Tiguac" (Nimitz Hill)	John Tatiague	(T) 671 475-6291	120	0	Public Cemetery; handled by the Department of Parks & Recreation - New cemetery identified in Mangilao, pending approval
7	Martinez (Anigua)	NOT IDENTIFIED	NOT IDENTIFIED	Unknown	Unknown	Private, Family Cemetery (Anigua behind KFC)
8	Mt. Carmel Cemetery (Agat)	Owen Bollinger, Administrator	(T) 671 477-9329	792*	250*	Catholic Cemetery handled by the Archdiocese of Guam
9	Our Lady of Peace (Windward Hills)	Christine Sellew, Funeral Director	(T) 671 633-8426/30 (C) 671 687-8437	1500	1500	Private, Commercial Cemetery
10	Perez (Yigo)	NOT IDENTIFIED	NOT IDENTIFIED	Unknown	Unknown	Private, Family Cemetery
11	Pigo Cemetery (Asan)	Owen Bollinger, Administrator	(T) 671 477-9329	792*	250*	Catholic Cemetery handled by the Archdiocese of Guam
12	Rest Haven (Ipan)	Remenster Jano, Executive Secretary of Guam Mission	(T) 671 477-9745	10	N/A	Private - handled by SDA Church (next to Ipan Public Beach)
13	San Dimas Cemetery (Merizo)	Lolita Ojeda, Mayor's Office	(T) 671 828-8312	0	136	Crypts handled by Mayor's Office
		San Dimas Church	(T) 671 828-8056			Ground burial handled by San Dimas Catholic Church
14	San Dionisio Cemetery (Umatac)	San Dimas Church	(T) 671 828-8056	0	0	Ground burial handled by San Dimas Catholic Church
15	SDA Cemetery (Umatac)	NOT IDENTIFIED	NOT IDENTIFIED	Unknown	Unknown	Located next to existing cemetery, but has not been used in years; overgrown with vegetation
16	St. Joseph Cemetery (Inarajan)	NOT IDENTIFIED	(T) 671 828-8102	Unknown	Unknown	Public Cemetery; handled by Inarajan Catholic Church
17	Veteran's Cemetery (Piti)	Evelyna Bonner	(T) 671 477-5697	800	0	Only for War Veteran's and their spouses; handled by the Department of Parks & Recreation

\*There are a total of 792 burial spaces available, 250 crypts for the 3 cemeteries managed by the Catholic Cemeteries of Guam c/o Owen Bollinger.

\* Verbiage in the plan to be provided by the Psychosocial chapter.

## **GRIEF AND STRESS MANAGEMENT FOR MASS FATALITY**

### **A. Pre-Pandemic**

- Disseminate instructions on creating Family Preparedness Plan for minors, elderly, and persons with disabilities, if caretaker becomes ill or dies.
  - Powers of Attorney
  - Designation of guardians, beneficiaries, and/or trust administrators
  - Information on insurance policies, health insurance, wills, etc.
  - Banking information
- Create Information Sheets/Fact Sheets for distribution as part of the preparedness plan, and for public service announcements during the pandemic.
  - Dealing with death at home and in the workplace
  - Coping with, and handling, human remains in the house
  - Teaching children about death
- Promote agreements between neighbors for helping one another during the pandemic.
- Provide guidance and recommendations in preparing children and young adults to become caregivers or to live independently in the course of a pandemic.
- Recommend planning for pets: death, adoption, etc.
- Prepare for the activation of Crisis and Information Hotlines during the pandemic.
- Encourage everyone to establish their own Emergency Kits.
  - Copy of will, power of attorney, etc.
  - Location of important documents
  - Contact names and numbers of next of kin
  - Special religious or cultural instructions for last rites, funeral, burial
  - Other pertinent information

### **B. During Pandemic**

- Implement phone hotlines for the public.
  - Activate crisis and information hotlines
  - Issue Public Service Announcements providing crisis and information hotline numbers
- Issue public advisories and announcements, including Fact Sheets/Information Sheets.
- Assign counselors to the Human Remains Care Center to assist grieving family members if and when the facility is activated.

### **C. Post Pandemic**

- Plan and encourage normalcy of handling human remains.
- Promote social re-connection: church services, organizations, etc.
- Continue the operation of crisis and information hotlines.

**MEMORANDUM OF AGREEMENT  
BETWEEN THE  
DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES,  
DEPARTMENT OF PUBLIC WORKS,  
DEPARTMENT OF PARKS AND RECREATION,  
OFFICE OF CHIEF MEDICAL EXAMINER, AND  
OFFICE OF HOMELAND SECURITY/OFFICE OF CIVIL DEFENSE**

The purpose of this Memorandum of Agreement (MoA) is to establish a formal working relationship between the Department of Public Health and Social Services (DPHSS), Department of Public Works (DPW), Department of Parks and Recreation (DPR), Office of the Chief Medical Examiner (OCME), and Guam Homeland Security/Office of Civil Defense (GHS/OCD). This MoA is specific to the implementation of the “Guam Mass Fatality Management Plan for a Pandemic” hereinafter referred to as the “Plan”.

**WITNESSETH**

**WHEREAS**, P.L. 26-173, “Island Guahan Emergency Health Powers Act”, requires DPHSS to develop a comprehensive plan to provide for a coordinated, appropriate response in the event of a public health emergency, which includes the safe disposition of human remains;

**WHEREAS**, Executive Order 2006-11, “Relative to the Protection of the Island in the Event of Pandemic and to the Creation of a Pandemic Planning Task Force”, directed DPHSS to co-chair the Pandemic Planning Task Force to develop a guide in preparing for and responding to a pandemic;

**WHEREAS**, during a pandemic, Guam will have to be prepared to manage additional deaths over and above the number of fatalities from all causes currently expected during the interpandemic period;

**WHEREAS**, in a worst-case scenario, Guam may expect deaths of approximately 8,400 individuals based on 5% fatality of the entire population similar to the 1918 Pandemic with the assumption that all such deaths are to occur over two pandemic waves, each lasting 6 to 8 weeks, that will result in the deaths of 75-100 individuals each day;

**WHEREAS**, most victims will have sought medical care and have been identified before dying in the hospital; however, many others will die in homes;

**WHEREAS**, there will be an increase in (1) the demand of body bags to wrap the greater number of human remains in and outside of the hospital, (2) number of official pronouncements and certifications of death by authorized individuals, and (3) the need of additional vehicles, stretchers, and applicable personnel to transport human remains from the sites of death to the morgue;

**WHEREAS**, the Guam Memorial Hospital Authority, the Guam Regional Medical City, Office of Chief Medical Examiner, U.S. Naval Hospital, Guam and island mortuaries will not have the capacity to store the anticipated increase of human remains in and outside their

facilities;

**WHEREAS**, Guam mortuaries will not have the resources to conduct mass fatality operations, including administration, embalming, cremation, storage, and burial of human remains, and they will lose staff to illness, family illness, death, and refusal to work;

**WHEREAS**, Federal assistance will be sought, but Guam cannot be assured that the necessary support can or will be provided in timely manner;

**WHEREAS**, part of the pandemic response plan developed by DPHSS is for the management of mass fatality through the implementation of the “Mass Fatality Management Plan for a Pandemic”;

**WHEREAS**, the Dededo Sports Complex has been identified as the “Human Remains Care Center” (HRCC) where all temporary processing and storage of human remains will be performed when normal morgue and mortuary services become unavailable during a pandemic.

**WHEREAS**, the Plan is divided into several phases, which are determined and announced by the World Health Organization, that prescribes necessary activities and the identification of responsible parties to ensure a consistent and coordinated response by involved entities to manage mass fatalities in the event of a pandemic event; and

**WHEREAS**, all parties agree to the provisions contained below.

**NOW, THEREFORE**, DPHSS, DPW, DPR, OCME, and GHS/OCD in consideration of mutual covenants hereafter set forth, agree to conduct the following during each specific Pandemic Condition of Readiness (PCOR):

#### **PANDEMIC CONDITION OF READINESS 4 (PCOR4)**

- A. Review and revise, as necessary, the multi-agency MOA between Government of Guam (DPR, DPW, and DPHSS) and GHS/OCD for coordination and support in response to mass fatality as a result of a pandemic. Refer to Attachment 10-H.
- B. DPR, DPW, and DPHSS shall submit an **annual** report to GHS/OCD on the following:
  - 1. DPW:
    - a. Listing of functional heavy machinery necessary for clearing and grading of land; digging of graves and for mass excavation (i.e., back hoes, excavators, bulldozers)
    - b. Listing of personnel of heavy machinery operators and maintenance personnel from the Highway Safety Division
    - c. Listing of fleet of functional buses under Bus Operations Division
    - d. Listing of personnel from Bus Operations Division
    - e. Listing of personnel from Transportation Maintenance Division
  - 2. DPR:
    - a. Listing of functional heavy machinery for clearing and grading of land; digging of graves and for mass excavation (i.e., back hoes, excavators, bulldozers)

- b. Listing of departmental personnel
  - c. Identify alternate public burial site
  - d. Provide update as to status of the public burial site for use
3. DPHSS:
- a. Listing of DPHSS personnel to be assigned to this effort
  - b. Listing of individuals to perform emergency embalming
  - c. Listing of DSC personnel to be assigned to this effort
  - d. Listing of inventory and equipment for operations of the HRCC to include refrigeration facilities

OHS/OCD shall compile the reports and provide the report to the DPHSS Director.

- C. The DPHSS Director shall coordinate within his/her department for administrative and support staff to be detailed periodically to OVS to be trained in completing the various certificates issued through this office with emphasis on Certificates of Death and Burial-Transit Permits.
- D. OVS shall ensure a sufficient number of Certificates of Death forms is in stock and shall consider an alternate form in the event of a pandemic. The DPHSS Chief Public Health Officer (CPHO) shall ensure this provision is complied with.
- E. DEH shall identify and request for the procurement of equipment DPHSS should acquire for mass fatality operations as part of the department's state of readiness in response to a public health emergency, such as influenza pandemic. DEH shall identify within DPHSS three laptops, 10 compatible digital cameras, three external 1GB external drives, three printers, facsimile machine, and activation of cellular phone with unlimited service plan.
- F. The forms for the operation of the HRCC shall be printed through a contractor as forms are to be printed in triplicates or quadruplicates. The forms to be used in the operation of the HRCC are as follows and shall be maintained on three flash drives and on the hard drive of three laptops by DEH as a backup:
  - 1. Human Remains Transportation Form (HRT Form). Refer to Attachment 10-I.
  - 2. Human Remains Processing Form (HRP Form). Refer to Attachment 10-J.
  - 3. Inventory and Disposition of Personal Effects Form. Refer to Attachment 10-K
  - 4. Human Remains Processing Log Sheet. Refer to Attachment 10-L.
  - 5. Certificate of Death. Refer to Attachment 10-M.
- G. The "TRM Kits" for the Temporary Refrigeration Morgue Teams are packaged. The TRM Kits will be prepared and maintained by DEH. Each kit will include, but may not be limited to:
  - 1. Key or combination to open the designated TRM and/or TRV's
  - 2. Human Remains Processing Forms (HRP Form) and Human Remains Processing Log Sheets
  - 3. Certificates of Death
  - 4. Contact numbers of applicable personnel and facilities
  - 5. Pens, pencils, permanent markers, and paper

6. Personal protection equipment (masks, gloves, boots, hand-sanitizers, and other personal protection and hygiene supplies)
  7. Disinfecting solution, spray, and/or wipes
- H. The “HRTT Kits” for Human Remains Transportation Team (HRTT) are created. The HRTT Kits will be prepared and maintained by DEH. Each kit will include, but may not be limited to:
1. Personal protection equipment (masks, gloves, boots, overalls, hand-sanitizers, etc.)
  2. Human Remains Transportation Forms (HRT Form)
  3. Human Remains Processing Forms (HRP Form)
  4. Inventory of Personal Effects Forms
  5. Blank photocopies of Certificates of Death Forms
  6. Pens, pencils, and permanent markers
  7. Street maps of Guam
  8. Body bags
  9. Clipboards
  10. Disinfecting solution, spray, and/or wipes
- I. The “TRM Kits” for the Temporary Refrigeration Morgue Teams and the “HRTT Kits” for the Human Remains Transportation Team are to be examined every two years, or as necessary, to ensure readiness for use.
- J. DEH shall review the processing steps for human remains at the HRCC (Attachment 10-N) and identify individuals to be assigned to perform internal and/or external embalming of remains when necessary to supplement the morticians.
- K. DPR shall take the necessary steps to finalize the alternate land site for public burial purposes.

### **PANDEMIC CONDITION OF READINESS 3 (PCOR3)**

- A. DPR, DPW, and DPHSS shall submit a **monthly** report to GHS/OCD on the following:
1. DPW:
    - a. Listing of functional heavy machinery necessary for clearing and grading of land; digging of graves and for mass excavation (i.e., back hoes, excavators, bulldozers)
    - b. Listing of personnel of heavy machinery operators and maintenance personnel from the Highway Safety Division
    - c. Listing of fleet of functional buses under Bus Operations Division
    - d. Listing of personnel from Bus Operations Division



- e. Listing of personnel from Transportation Maintenance Division
- 2. DPR:
  - a. Listing of functional heavy machinery for clearing and grading of land; digging of graves and for mass excavation (i.e., back hoes, excavators, bulldozers)
  - b. Listing of departmental personnel
  - c. Identify alternate public burial site
  - d. Provide update as to status of the public burial site for use
- 3. DPHSS:
  - a. Listing of DPHSS personnel to be assigned to this effort
  - b. Listing of individuals to perform emergency embalming
  - c. Listing of DSC personnel to be assigned to this effort
  - d. Listing of inventory and equipment for operations of the HRCC to include refrigeration facilities

OHS/OCD shall compile the reports and provide the report to the DPHSS Director.

- B. The flow chart of the HRCC operation, identifying areas for administrative processing, remains processing and storage, and the transportation of remains at a minimum, is reviewed and revised every January of each year, as necessary by the DEH. DEH shall transmit changes to the operation to the affected external entities and internal divisions of DPHSS.
- C. The Chief Medical Examiner will identify and train licensed medical doctors who can assist OCME to pronounce and certify deaths outside hospital settings.
- D. Each TRM Team will be composed of two individuals. Each team will be scheduled to work an eight-hour shift, unless otherwise directed. The number of teams assembled will be determined by DEH. The source of personnel for the teams shall be from the primary government entities and volunteers identified to operate the TRM. Teams will be identified by position title from the quarterly reports received from GHS/OCD via the DPHSS Director.
- E. Each HRTT will be comprised of three individuals, a driver and two assistants. Each team will be scheduled to work an eight-hour shift, unless otherwise directed. The number of teams assembled will be determined by DEH. The source of personnel for the teams shall be from the primary government entities and volunteers identified to transport human remains. Teams will be identified by position title from the quarterly reports received from Teams will be identified by position title from the quarterly reports received from GHS/OCD via the DPHSS Director.
- F. DEH shall conduct a training course on the management of mass fatality operations with

primary government entities and volunteers within 60 days of entering PCOR3. The course shall include TRM Team, HRTT, and Customer Service Representatives in their respective duties and responsibilities in preparation for their possible activation. At a minimum, they will be instructed on completing applicable forms; operating laptop, printer, and digital camera; and fingerprinting decedents. Additional training shall be conducted as the need is identified.

- G. DPHSS Director shall convene a meeting of all primary government entities to dialogue on the state of preparedness in comparison to the flow chart of the HRCC operation identifying areas for administrative processing, embalming, dressing and casketing of decedents, temporary storage, transportation, and personnel assignments.
- H. The Chief Medical Examiner shall transmit the list of trained licensed medical doctors who will assist OCME to pronounce and certify deaths outside hospital settings to GHS/OHS who in turn shall transmit the list to the DPHSS Director.

#### **PANDEMIC CONDITION OF READINESS 2 (PCOR2)**

- A. DPR, DPW, and DPHSS shall submit a **weekly** report to GHS/OCD on the following:
  - 1. DPW:
    - a. Listing of functional heavy machinery necessary for clearing and grading of land; digging of graves and for mass excavation (i.e., back hoes, excavators, bulldozers)
    - b. Listing of personnel of heavy machinery operators and maintenance personnel from the Highway Safety Division
    - c. Listing of fleet of functional buses under Bus Operations Division
    - d. Listing of personnel from Bus Operations Division
    - e. Listing of personnel from Transportation Maintenance Division
  - 2. DPR:
    - a. Listing of functional heavy machinery for clearing and grading of land; digging of graves and for mass excavation (i.e., back hoes, excavators, bulldozers)
    - b. Listing of departmental personnel
    - c. Identify alternate public burial site
    - d. Provide update as to status of the public burial site for use
  - 3. DPHSS:
    - a. Listing of DPHSS personnel to be assigned to this effort
    - b. Listing of individuals to perform emergency embalming
    - c. Listing of DSC personnel to be assigned to this effort
    - d. Listing of inventory and equipment for operations of the HRCC to include refrigeration facilities

OHS/OCD shall compile the reports and provide the report to the DPHSS Director.

- B. DPHSS Director shall convene a meeting of all primary government entities to dialogue on the state of preparedness in comparison to the flow chart of the HRCC operation identifying areas for administrative processing, embalming, dressing and casketing of decedents, temporary storage, transportation, and personnel assignments.
- C. Upon completion of “B” above, each government entity shall provide written notice to their personnel of their anticipated assignment to the HRCC. In addition, the GHS/OCD shall transmit a memorandum to each affected employee to further formalize the intent of the plan. This memorandum will further identify and acknowledge their duties and responsibilities in the event the Mass Fatality Plan is implemented.
- D. The Chief Medical Examiner shall transmit an *updated* list of trained licensed medical doctors who will assist OCME to pronounce and certify deaths outside hospital settings to GHS/OHS who in turn shall transmit the list to the DPHSS Director.
- E. DEH shall conduct a training course on the management of mass fatality operations with primary government entities and volunteers within 30 days of entering PCOR2 as guided by WHO. The course shall include TRM, HRTT, and CSR teams in their respective duties and responsibilities in preparation for their possible activation. At a minimum, they will be instructed on completing applicable forms; operating laptop, printer, and digital camera; and fingerprinting decedents. Additional training shall be conducted as the need is identified in this condition of readiness since it is unknown how each condition will last.

#### **PANDEMIC CONDITION OF READINESS 1 (PCOR1)**

- A. GMHA shall notify EOC when morgue space at GMHA and the OCME approaches maximum capacity and the need for additional space is anticipated. In addition, DPHSS shall monitor the operations of the island’s mortuaries.
- B. Upon notification by DPHSS RAC, HRCC shall be activated for full operations within 72 hours. DPHSS Director shall identify and assign a HRCC Manager to oversee the operation of the HRCC, who may or may not be DEH personnel.
  - 1. All identified personnel shall report to the HRCC (Dededo Sports Complex) upon being notified of their activation.
  - 2. The HRCC Manager shall convene a meeting of key agencies and stakeholders to prepare for the opening of the HRCC.
  - 3. The HRCC Manager shall conduct on-site training of all personnel assigned to the HRCC.
  - 4. The HRCC Manager shall identify a HRCC Fiscal Manager to collaborate with

- DPHSS RAC in the coordination of the delivery of the TRM and initiate other procurement activities necessary for the full operations of the HRCC. The HRCC Fiscal Manager shall report directly to the HRCC Manager.
5. The HRCC Manager shall assess operations and determine when the Employee Assistance Program (EAP) shall be activated. The activation of this component of the HRCC shall require personnel to work longer hours and remain on site. The EAP shall provide personnel support in the form of sleeping quarters, shower stalls, laundry, nourishment and telecommunications for personnel and their family, at a minimum. The HRCC Manager may designate staff to implement the EAP.
  6. The HRCC Manager shall notify the psychosocial component of the operations and request they be prepared to staff the site upon receiving confirmation from him/her.
- C. The HRCC Manager shall notify EOC once the HRCC is ready to provide mortuary services.
- D. Upon receiving notification from the HRCC Manager, template(s) for public service announcements of telephone hotlines for the pickup and transport of human remain to the HRCC is reviewed and revised, as necessary. Refer to Attachment 10-O. Once finalized, the announcement(s) is released to the public through the JIC EOC with a copy faxed to the HRCC to ensure coordination of services and to officially notify the HRCC Manager that the public is now aware of their services.
- E. The HRCC Manager or his designee shall telephonically notify the directors of island funeral homes once the HRCC begins accepting human remains. They will be provided instructions for retrieving bodies from the HRCC for funeral services.
- F. DPR, DPW, and DPHSS shall submit a daily report to the HRCC Manager on the status of their heavy machinery for clearing of land and digging of graves, operators of such equipment, status of their fleet of vehicles, and an updated roster of bus drivers, as applicable.
- G. Federal assistance is sought through EOC for the activation of DMORT to Guam.

This Agreement shall be effective on the date approved by the Governor of Guam.

**It is mutually agreed that:**

- A. Either of the parties hereto, may, by written notice to the other, terminate this Agreement in whole or in part at any time, either for convenience or default.

B. Upon completion of the project, all supplies and equipment furnished for the implementation of the Plan will be returned to the respective agencies.

**IN WITNESS WHEREOF**, the parties have entered into this Agreement on the dates indicated by their respective names.

**AS APPROVED TO FORM:**

**DEPARTMENT OF PUBLIC HEALTH  
AND SOCIAL SERVICES:**

\_\_\_\_\_  
[Insert Name]  
Director

Date: \_\_\_\_\_

**DEPARTMENT OF PUBLIC WORKS:**

\_\_\_\_\_  
[Insert Name]  
Director

Date: \_\_\_\_\_

**DEPARTMENT OF PARKS AND  
RECREATION:**

\_\_\_\_\_  
[Insert name]  
Director

Date: \_\_\_\_\_

**OFFICE OF CHIEF MEDICAL  
EXAMINER:**

\_\_\_\_\_  
[Insert name]  
Chief Medical Examiner

Date: \_\_\_\_\_

**OFFICE OF CHIEF MEDICAL  
EXAMINER:**

\_\_\_\_\_  
[Insert name]  
Chief Medical Examiner

Date: \_\_\_\_\_

**GUAM HOMELAND SECURITY/OFFICE  
OF CIVIL DEFENSE:**

\_\_\_\_\_  
[Insert name]  
Director

Date: \_\_\_\_\_

**APPROVED AS TO LEGALITY AND  
FORM:**

\_\_\_\_\_  
**[Insert name]**  
Attorney General of Guam

Date: \_\_\_\_\_

\_\_\_\_\_  
**[Insert name]**  
Governor of Guam

Date: \_\_\_\_\_

# HUMAN REMAINS TRANSPORTATION FORM

## DRIVER

Name \_\_\_\_\_  
(Last, First)

Signature \_\_\_\_\_

## ORIGIN

Address \_\_\_\_\_

Witness \_\_\_\_\_  
(Last, First)

Signature \_\_\_\_\_

Date \_\_\_\_\_

## DECEDENT

Name \_\_\_\_\_  
(Last, First)

SSN \_\_\_\_\_

DOB \_\_\_\_\_

## DESTINATION

Address \_\_\_\_\_

Recipient \_\_\_\_\_  
(Last, First)

Signature \_\_\_\_\_

Date \_\_\_\_\_

FORM PRINTED IN NO CARBON REQUIRED (NCR) PAPER IN QUADRIPLICATE.



PERFORATION ALONG LINE TO ALLOW DETACHMENT

<b>HUMAN REMAINS PROCESSING FORM</b>		<b>0001</b>
<b><u>DECEDENT</u></b>	<b><u>PROCESSED BY</u></b>	
Name _____ (Last, First)	Name _____ (Last, First)	
SSN _____	Signature _____	
DOB _____	Date _____	
<b><u>INFORMANT</u></b>	<b><u>FUNERAL SERVICE</u></b>	
Name _____ (Last, First)	Primary _____	
SSN _____	Alternate _____	
Relation _____ Tel _____	<i>Original - Human Remains Care Center</i>	
Signature _____	<i>Copy 1 - Office of Vital Statistics</i>	
	<i>Copy 2 - Family</i>	

FORM PRINTED IN NO CARBON REQUIRED (NCR) PAPER IN TRIPLICATE

PERFORATION ALONG LINE TO ALLOW DETACHMENT

FINGERPRINT CARD					TOE TAG			
0001				Processed by:  INITIAL		0001		
NAME _____ (LAST, FIRST)					NAME _____ (LAST, FIRST)		CAUSE OF DEATH _____	DATE _____
DATE _____								

FORM PRINTED IN CARD STOCK (WT. 110) AND ATTACHED BETWEEN "CORPSE PROCESSING FORM" AND "IDENTIFICATION PLACARD"

HOLE PUNCHED

PERFORATION ALONG LINE TO ALLOW DETACHMENT

**IDENTIFICATION PLACARD**

**0001**

NAME \_\_\_\_\_ DATE \_\_\_\_\_  
(LAST, FIRST)

FORM PRINTED IN WATER-RESISTANT CARD AND ATTACHED AFTER  
"FINGERPRINT CARD/TOE TAG"

## INVENTORY AND DISPOSITION OF PERSONAL EFFECTS

DECEDENT NAME: \_\_\_\_\_ SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

QTY	ITEM/DESCRIPTION	RECEIVED	CONDITION	DISPOSITION

ATTACHMENT 10-K

### Authorization for Disposition

The above listed personal belongings were received and shall be disposed of as indicated above; the disposition is authorized by:

Name of Authorized Person \_\_\_\_\_ Signature of Authorized Person \_\_\_\_\_ Relationship to Decedent \_\_\_\_\_ Date \_\_\_\_\_

### Acknowledgement of Receipt of Personal Effects

I hereby acknowledge receipt of the above listed items.

Print Name and Signature \_\_\_\_\_ Title and Agency \_\_\_\_\_ Date \_\_\_\_\_

### Person Eligible to Receive Effects

I understand that the delivery of the personal effects to me does not itself vest title for the property of effects in me. Further, I accept these effects contingent upon possible disposition to others in accordance with applicable Guam laws.

Print Name \_\_\_\_\_ Signature \_\_\_\_\_ 

YES

NO

 Date \_\_\_\_\_

Personal Effects Were Inventoried  
Before Receipt? Please check box.

HUMAN REMAINS PROCESSING LOG SHEET

SERIAL NUMBER	NAME (LAST, FIRST)	S E X	PROCESSED IN					PROCESSED OUT									COMMENT? (√)	
			Transported In					Transported Out									(If yes, see below)	
			Date	Method (√)			Initial	Date	Method (√)			Disposition (√)				Initial	Yes	No
				CTT	Family	Other			Funeral Home	Medical Examiner	Cemetery	Other						

COMMENTS

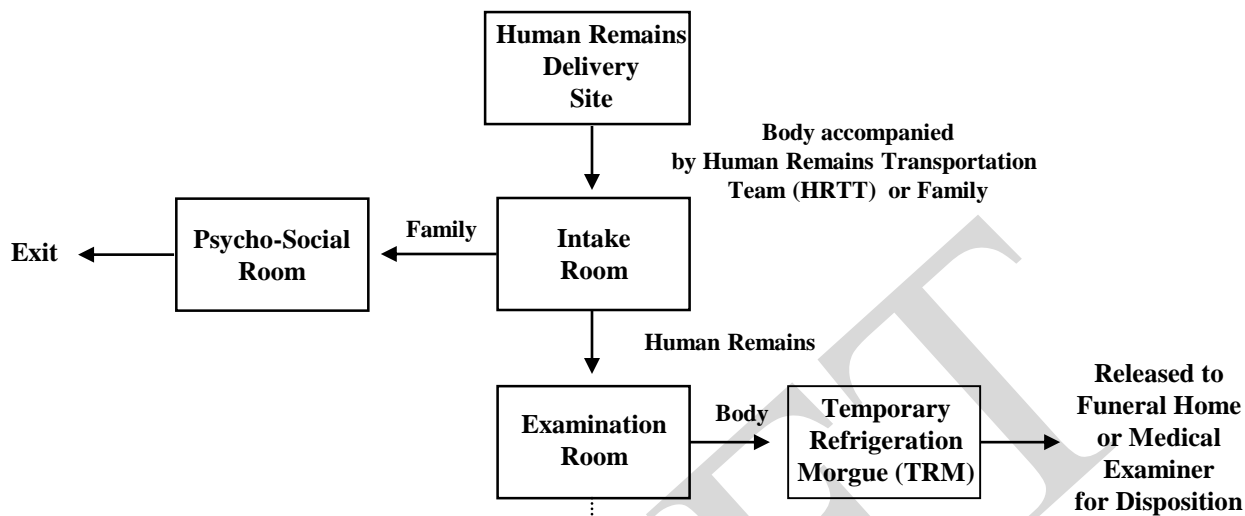
ATTACHMENT 10-L

**GOVERNMENT OF GUAM  
CERTIFICATE OF DEATH**

STATE FILE NO.

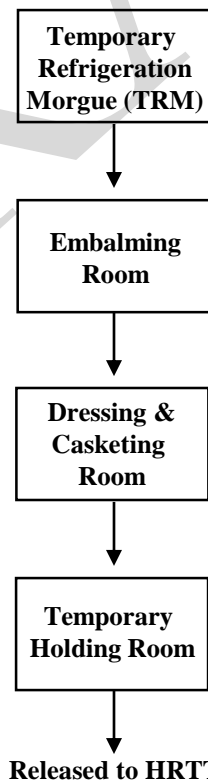
1. DECEDENT'S LEGAL NAME (INCLUDE AKA'S IF ANY) (FIRST, MIDDLE, LAST)					2. SEX		3. SOCIAL SECURITY NUMBER		
4a. AGE-LAST BIRTHDAY (YEARS)		4b. UNDER 1 YEAR Months:      Days:      Hours:      Minutes:		4c. UNDER 1 DAY		5. DATE OF BIRTH (Mo/Day/Yr)		6. BIRTHPLACE (City and State or Foreign Country)	
7a. RESIDENCE-STATE				7b. COUNTRY		7c. CITY OR TOWN			
7d. STREET AND NUMBER					7e. APT. NO		7f. ZIP CODE		7g. INSIDE CITY LIMITS? <input type="checkbox"/> YES <input type="checkbox"/> NO
8. EVER IN US ARMED FORCES? <input type="checkbox"/> YES <input type="checkbox"/> NO			9. MARITAL STATUS AT TIME OF DEATH <input type="checkbox"/> MARRIED <input type="checkbox"/> MARRIED, but separated <input type="checkbox"/> WIDOWED <input type="checkbox"/> DIVORCED <input type="checkbox"/> NEVER MARRIED <input type="checkbox"/> UNKNOWN			10. SURVIVING SPOUSE'S NAME (If wife, give name prior to first marriage)			
11. FATHER'S NAME (First, Middle, Last)					12. MOTHER'S NAME PRIOR TO FIRST MARRIAGE (First, Middle, Last)				
13a. INFORMANT'S NAME			13b. RELATIONSHIP TO DECEDENT			13c. MAILING ADDRESS (Street and Number, City, State, Zip Code)			
14. PLACE OF DEATH (Check only one: see instructions)									
IF DEATH OCCURED IN A HOSPITAL: <input type="checkbox"/> Inpatient <input type="checkbox"/> Emergency Room/Outpatient <input type="checkbox"/> Dead on Arrival					IF DEATH OCCURED SOMEWHERE OTHER THAN A HOSPITAL: <input type="checkbox"/> Hospice facility <input type="checkbox"/> Nursing home/Long term care facility <input type="checkbox"/> Decedent's home <input type="checkbox"/> Other (Specify):				
15. FACILITY NAME (If not institution, give street & number)					16. CITY OR TOWN, STATE, AND ZIP CODE		17. COUNTRY OF DEATH		
18. METHOD OF DISPOSITION: <input type="checkbox"/> Burial <input type="checkbox"/> Cremation <input type="checkbox"/> Donation <input type="checkbox"/> Entombment <input type="checkbox"/> Removal from State <input type="checkbox"/> Other (Specify):						19. PLACE OF DISPOSITION: (Name of cemetery, crematory, other place)			
20. LOCATION-CITY, TOWN, AND STATE				21. NAME AND COMPLETE ADDRESS OF FUNERAL FACILITY					
22. SIGNATURE OF FUNERAL SERVICE LICENSEE OR OTHER AGENT							23. LICENSE NUMBER (Of Licensee)		
<b>ITEMS 24-28 MUST BE COMPLETED BY PERSON WHO PRONOUNCES OR CERTIFIES DEATH</b>					24. DATE PRONOUNCED DEAD (Mo/Day/Yr)		25. TIME PRONOUNCED DEAD		
26. SIGNATURE OF PERSON PRONOUNCING DEATH (Only when applicable)					27. LICENSE NUMBER		28. DATE SIGNED (Mo/Day/Yr)		
29. ACTUAL OR PRESUMED DATE OF DEATH (Mo/Day/Yr) (Spell Month)				30. ACTUAL OR PRESUMED TIME OF DEATH			31. WAS MEDICAL EXAMINER OR CORONER CONTACTED? <input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>CAUSE OF DEATH (See instructions and examples)</b> 32. <b>PART I.</b> Enter the chain of events--diseases, injuries, or complications--that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE. Enter only one cause on a line. Add additional lines if necessary.  <div style="display: flex; justify-content: space-between;"> <div style="width: 80%;">           IMMEDIATE CAUSE (Final disease or condition resulting in death)             a. _____ Due to (or as a consequence of): _____             b. _____ Due to (or as a consequence of): _____   <b>UNDERLYING CAUSE</b> (disease or injury that initiated the events resulting in death) <b>LAST</b>            c. _____ Due to (or as a consequence of): _____             d. _____ Due to (or as a consequence of): _____         </div> <div style="width: 15%;">           Approximate interval: Onset to death             _____             _____             _____             _____         </div> </div>									
<b>PART II.</b> Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I							33. WAS AN AUTOPSY PERFORMED? <input type="checkbox"/> YES <input type="checkbox"/> NO		
							34. WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE THE CAUSE OF DEATH? <input type="checkbox"/> YES <input type="checkbox"/> NO		
35. DID TOBACCO USE CONTRIBUTE TO DEATH? <input type="checkbox"/> Yes <input type="checkbox"/> Probably <input type="checkbox"/> No <input type="checkbox"/> Unknown			36. IF FEMALE: <input type="checkbox"/> Not Pregnant within past year <input type="checkbox"/> Not pregnant, but pregnant 43 days to 1 year before death <input type="checkbox"/> Pregnant at time of death <input type="checkbox"/> Unknown if pregnant within past year <input type="checkbox"/> Not pregnant, but pregnant within 42 days of death			37. MANNER OF DEATH <input type="checkbox"/> Natural <input type="checkbox"/> Homicide <input type="checkbox"/> Accident <input type="checkbox"/> Pending investigation <input type="checkbox"/> Suicide <input type="checkbox"/> Could not be determined			
38. DATE OF INJURY (Mo/Day/Yr) (Spell Month)		39. TIME OF INJURY		40. PLACE OF INJURY (e.g., Decedent's home; construction site; restaurant; wooded area)				41. INJURY AT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO	
42. LOCATION OF INJURY: State: _____ City or Town: _____ Street & Number: _____ Apartment No.: _____ Zip Code: _____									
43. DESCRIBE HOW INJURY OCCURRED:					44. IF TRANSPORTATION INJURY, SPECIFY: <input type="checkbox"/> Driver/Operator <input type="checkbox"/> Pedestrian <input type="checkbox"/> Passenger <input type="checkbox"/> Other (Specify)				
45. CERTIFIER (Check only one): <input type="checkbox"/> Certifying physician-To the best of my knowledge, death occurred due to the cause(s) and manner stated. <input type="checkbox"/> Pronouncing & Certifying physician-To the best of my knowledge, death occurred at the time, date and place, and due to the cause(s) and manner stated. <input type="checkbox"/> Medical Examiner/Coroner-On the basis of examination, and/or investigation, in my opinion, death occurred at the time, date, and place, and due to the cause(s) and manner stated.  Signature of certifier: _____									
46. NAME, ADDRESS, AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH (item 32)									
47. TITLE OF CERTIFIER				48. LICENSE NUMBER			49. DATE CERTIFIED (Mo/Day/Yr)		
50. FOR REGISTRAR ONLY-DATE FILED (Mo/Day/Yr)					50a. REGISTRAR'S SIGNATURE				
51. DECEDENT'S EDUCATION-Check the box that best describes the highest degree or level of school completed at the time of death. <input type="checkbox"/> 8th grade or less <input type="checkbox"/> 9th - 12th grade; no diploma <input type="checkbox"/> High school graduate or GED completed <input type="checkbox"/> Some college credit, but no degree <input type="checkbox"/> Associate degree (e.g., AA, AS) <input type="checkbox"/> Bachelor's degree (e.g., BA, AB, BS) <input type="checkbox"/> Master's degree (e.g., MA, MS, MEng, MEd, MSW, MBA) <input type="checkbox"/> Doctorate (e.g., PhD, EdD) or Professional degree (e.g., MD, DDS, DVM, LLB, JD)			52. DECEDENT OF HISPANIC ORIGIN? Check the box that best describes whether the decedent is Spanish/Hispanic/Latino. Check the "No" box if decedent is not Spanish/Hispanic/Latino. <input type="checkbox"/> No, not Spanish/Hispanic/Latino <input type="checkbox"/> Yes, Mexican, Mexican American, Chicano <input type="checkbox"/> Yes, Puerto Rican <input type="checkbox"/> Yes, Cuban <input type="checkbox"/> Yes, other Spanish/Hispanic/ Latino (Specify) _____			53. DECEDENT'S RACE (Check one or more races to indicate what the decedent considered himself or herself to be) <input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian or Alaska Native (Name of the enrolled or principal tribe) _____ <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian (Specify) _____ <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander (Specify) _____ <input type="checkbox"/> Other (Specify) _____			
54. DECEDENT'S USUAL OCCUPATION (Indicate type of work done during most of working life, DO NOT USE RETIRED).									
55. KIND OF BUSINESS/INDUSTRY									

# FLOW-CHART OF HUMAN REMAINS CARE CENTER (HRCC)



**PARTIAL ACTIVATION  
OF HRCC WITH ONLY MORGUE  
OPERATION**

**EXPANDED ACTIVATION OF  
HRCC WITH TEMPORARY  
MORTUARY SERVICES**



**DRAFT  
PRESS RELEASE**

# \_\_\_\_\_

**ACTIVATION OF THE HUMAN REMAINS CARE CENTER AND THE  
DELIVERY OF DECEASED**

The Governor of Guam and the Director of the Department of Public Health and Social Services (DPHSS) would like to inform the public that to expand the current morgue operations of the Guam Memorial Hospital Authority (GMHA) a Human Remains Care Center (HRCC) has been activated. The center is located at [INSERT NAME AND LOCATION OF SITE] and will act as a temporary morgue site for deceased individuals in preparation for their final disposition.

Furthermore, the public is advised to contact (Insert Applicable Entity) at (Insert Telephone Number) to report family members who have died from influenza or other natural causes at home. This telephone number will be in operation 24 hours a day, 7 days a week. Upon notification of such death, a team from (Insert Applicable Entity) will arrive at the residence to gather and transport the deceased to the CPC. In preparation, (Insert Applicable Entity) requests that a current photo identification of the deceased and the next of kin of the decedent be available when the transportation team arrives. The transportation team will interview the next of kin to obtain the information of the decedent to complete the Certificate of Death.

As an alternative, if they so wish, families may deliver their deceased loved one(s) directly to the HRCC. The deceased should be wrapped in a plastic sheet when delivered. If a plastic sheet is unavailable, bed sheets or blankets may be substituted. The deceased's next of kin must accompany the remains and have his/her current photo identification along with a photo identification of the deceased. (Insert Applicable Entity) is requesting that families not deliver remains to the HRCC if they are too decomposed. They should instead contact the transportation team to collect the deceased.

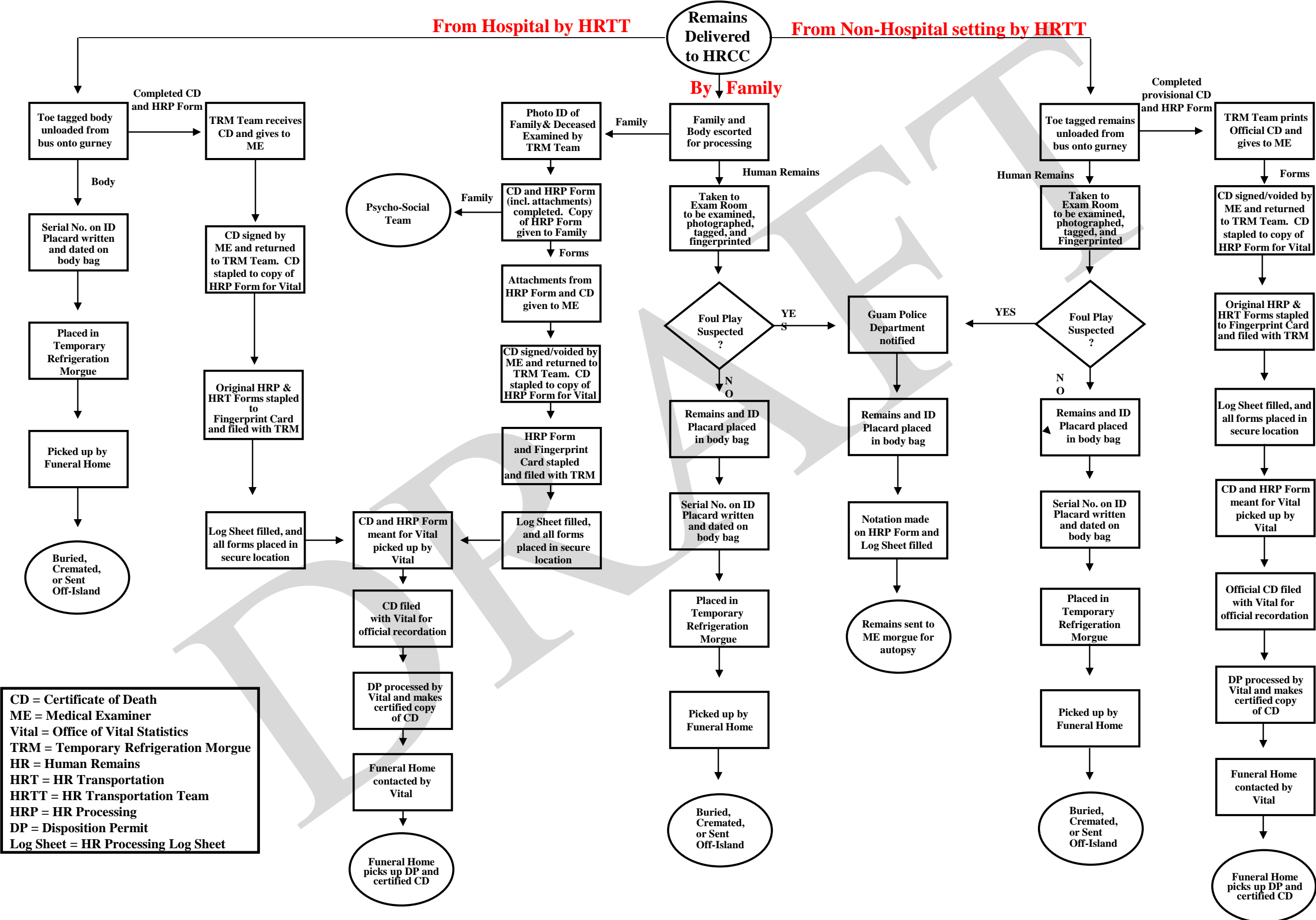
Individuals passing away due to the pandemic will not require an autopsy. An autopsy will only be performed in cases of suspicious or unknown causes.

For further information, please call (Insert Telephone Number). The public's understanding and cooperation during these extremely difficult times are greatly appreciated.

**ARTHUR U. SAN AGUSTIN, MHR**



ALGORITHM FOR MANAGEMENT OF HUMAN REMAINS AT THE HUMAN REMAINS CARE CENTER (HRCC)



# BURIAL-TRANSIT PERMIT

Date issued \_\_\_\_\_ No. \_\_\_\_\_

Name \_\_\_\_\_

Date of Death \_\_\_\_\_ Age \_\_\_\_\_

Place of Death \_\_\_\_\_

Burial ☐ Cremation ☐  
Removal ☐ Burial / sea ☐

SPECIFY \_\_\_\_\_

Date \_\_\_\_\_

(CEMETERY DESTINATION)

(FUNERAL ESTABLISHMENT)

Remarks \_\_\_\_\_

GOVERNMENT  
OF GUAM

# BURIAL-TRANSIT PERMIT

DEPT. OF PUBLIC  
HEALTH & SOCIAL  
SERVICES

PERMIT NO. \_\_\_\_\_

NAME OF DECEASED (FIRST)		(MIDDLE)		(LAST)		DATE OF DEATH	
SEX	RACE	AGE	PLACE OF DEATH (CITY OR TOWN)		COUNTRY	(STATE)	
Method of disposal		PLACE OF DISPOSITION (NAME OF CEMETERY OR CREMATORY)					
<input type="checkbox"/> Burial	Date _____	<input type="checkbox"/> Cremation		(CITY OR TOWN)		COUNTRY	(STATE)
<input type="checkbox"/> Removal	Date _____	<input type="checkbox"/> Date _____					
Name of funeral establishment		BUSINESS ADDRESS					

A certificate of death having been filed, permission is hereby given to dispose of this body

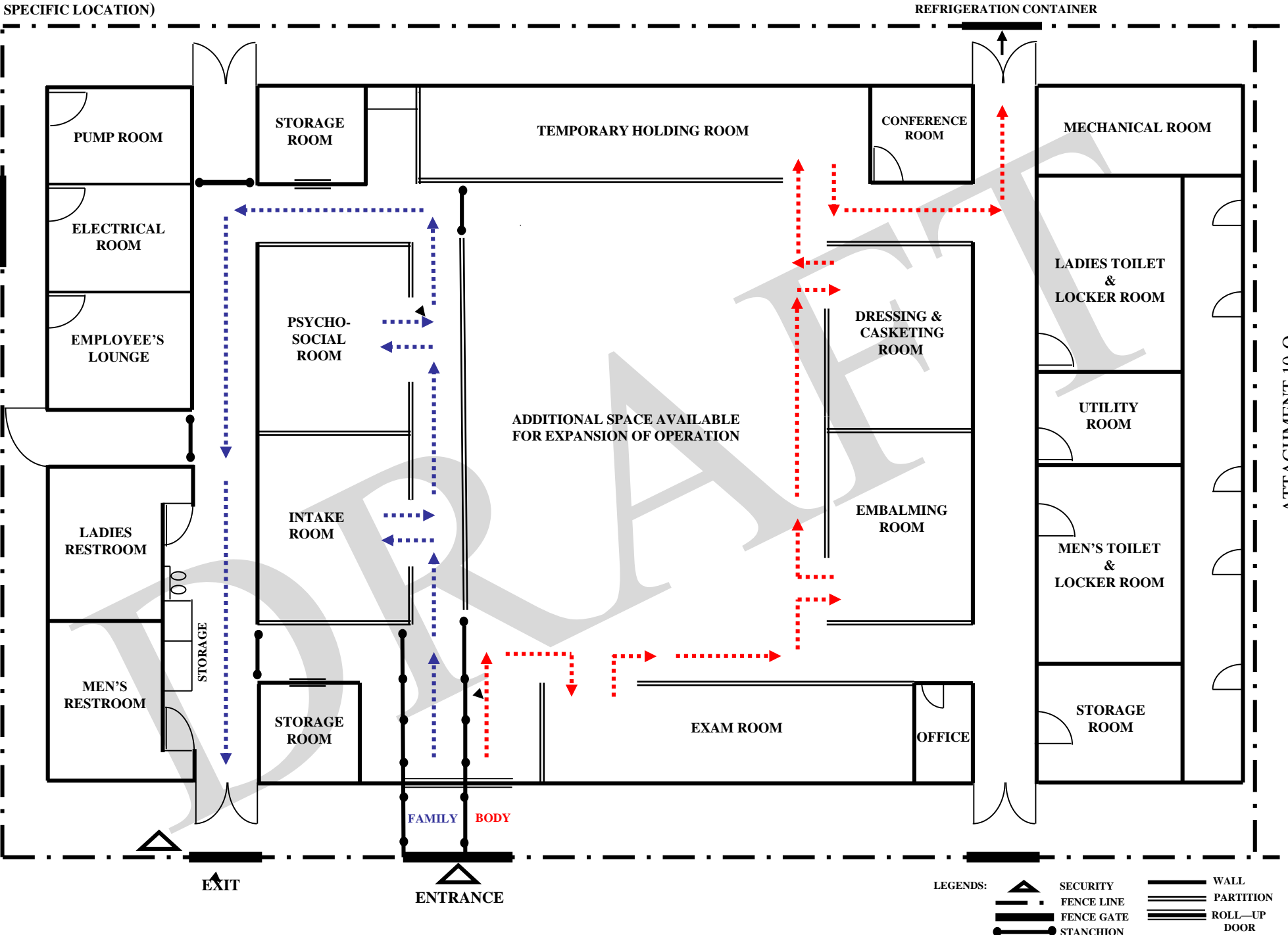
SIGNATURE OF LOCAL REGISTRAR		(CITY OR TOWN)		DATE	
Authorized disposition as stated above occurred on (date)		SIGNATURE OF PERSON IN CHARGE OF CEMETERY		DATE	
Destination	Carrier	Signature (handling authority)		DATE	

Where no designated person is in charge of a cemetery, the funeral director should sign here. The person signing is responsible for returning this permit within 10 days to the register of the district in which burial took place.

OFFICE OF VITAL STATISTICS

# PROPOSED FLOOR PLAN FOR THE CORPSE PROCESSING CENTER

(BELOW IS FOR THE DEDEDO SPORTS COMPLEX, IF ALTERNATIVE SITE IS UTILIZED, IT WILL NEED TO BE MODIFIED FOR THAT SPECIFIC LOCATION)



**DRAFT**

**PRESS RELEASE**

# \_\_\_\_\_

**This draft press release needs to be further revised based on the updated Mass Fatality Plan**

**EXPANSION OF HRCC FOR TEMPORARY MORTUARY SERVICES**

The Governor of Guam and the Director of the Department of Public Health and Social Services (DPHSS) would like to inform the public that the operation of the Human Remains Care Center (HRCC) has been expanded to include temporary mortuary services. This is made necessary to augment the services of the local funeral homes.

Any deceased individual delivered to the HRCC by the transportation team that cannot be handled by a funeral home will be processed at the HRCC.

Should the transportation team of the HRCC transport the deceased, it is requested that the families provide them with the clothing they wish the deceased to wear for his/her burial. Please do not include any jewelry, valuables, or other accessories. The clothing should be placed in a plastic bag and clearly labeled with the name of the deceased. If the family is delivering the deceased directly to the HRCC, it is recommended that the appropriate clothing accompany the deceased.

Furthermore, the public is advised that if standard caskets are not available, alternative casketing may be utilized.

The Governor of Guam and the Director of Public Health and Social Services wishes to assure the public that all human remains will be handled with dignity and care. However, the public should be cautioned that in extreme circumstances the HRCC may modify, limit, or cease certain steps or procedures.

For further information, please call (Insert Telephone Number). The public's understanding and cooperation under such extreme difficulties are greatly appreciated.

**ARTHUR U. SAN AGUSTIN, MHR**